

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000010640

**Entity Name:** RA OUTDOORS, LLC

**Current Principal Place of Business:**

717 N HARWOOD ST, STE 2400  
DALLAS, TX 75201

**Current Mailing Address:**

717 N HARWOOD ST, STE 2400  
DALLAS, TX 75201 US

**FEI Number:** 82-2521854

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           SHETH, BRIAN N.  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

Title           MANAGER  
Name           TAYLOR, MARTIN A.  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

Title           MANAGER  
Name           STAHL, NICOLAS E.  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

Title           MANAGER  
Name           SAROYA, MANEET S.  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

Title           MANAGER  
Name           CAMERON, FRASIER  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

Title           MEMBER  
Name           SOPRIS INTERMEDIATE, LLC  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

Title           MANAGER  
Name           DALTON, JEFFREY M.  
Address        717 N HARWOOD ST, STE 2400  
City-State-Zip: DALLAS TX 75201

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN N. SHETH

**MANAGER**

**04/27/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date