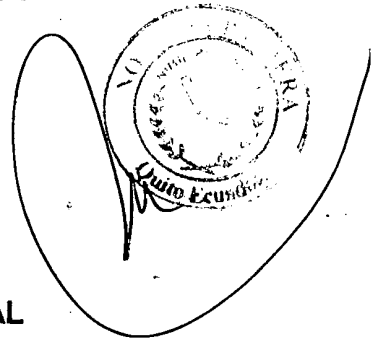




**DR. JORGE MACHADO CEVALLOS**



**PROTOCOLIZACION No. 14.366**

**DEL CERTIFICADO DE EXISTENCIA LEGAL  
DE LA CIA. HERBALIFE INTERNATIONAL INC.  
Y SU DEBIDA TRADUCCION AL ESPAÑOL**



**CUANTIA: INDETERMINADA**

**Quito, a 4 DE DICIEMBRE DEL 2012**

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12 **Dí 4 copias**

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14 **n.o.**

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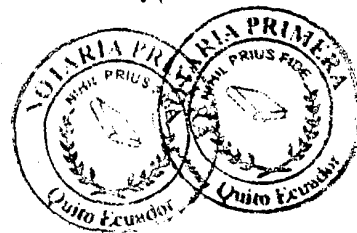
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SECRETARIO DE ESTADO

ESTADO DE NEVADA

CERTIFICADO DE VIGENCIA CON  
ESTÁTUS DE SOLVENTE



YO, ROSS MILLER, elegido por voto popular y calificado como Secretario de Estado de Nevada, certifico que soy, según las leyes del mencionado Estado, el custodio de los registros relacionados a los documentos entregados por corporaciones, corporaciones sin fines de lucro, corporaciones constituidas por una sola persona, compañías de responsabilidad limitada, sociedades limitadas, sociedades de responsabilidad limitada y fideicomisos comerciales de conformidad con el Título 7 de los Estatutos Revisados de Nevada que actualmente tengan estatus de solvencia o que fueron solventes durante un período de tiempo subsecuente al año 1976, y soy el oficial competente para ejecutar este certificado.

Adicionalmente certifico que los registros del Secretario de Estado de Nevada, a la fecha de este certificado, evidencian que **HERBALIFE INTERNATIONAL INC.**, es una corporación debidamente organizada bajo las leyes de Nevada y que existe bajo y en virtud de las leyes del Estado de Nevada desde el 13 de enero de 2004, y está solvente en este estado.

EN FE DE LO CUAL, estampo mi firma y el Gran Sello del Estado en mi oficina el 13 de septiembre de 2012.

ROSS MILLER  
Secretario de Estado

(sello)

Certificado Por: Joann Larson

Certificado Número: C20120911-1364

Usted puede verificar este certificado en línea <http://nvsos.gov/>

Traducido por: Heather Hayes  
C.I.: 171984771-5

SECRETARIO DE ESTADO  
ESTADO DE NEVADA



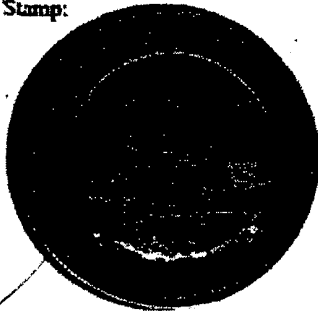
APOSTILLA  
(Convención de La Haya del 5 de octubre de 1961)

1. País: **Estados Unidos de América**

Este documento público

2. Ha sido firmado por JOANN LARSON  
3. Actuando en la capacidad de ACTUARIO DE CERTIFICACIÓN  
4. Lleva el sello del ESTADO DE NEVADA  
CERTIFICADO  
5. En **Carson City, Nevada, EE.UU.**  
6. El día TRECE DE SEPTIEMBRE DE 2012  
7. Por **ROSS MILLER, Secretario de Estado, Estado de Nevada, EE.UU.**  
8. 2013/55/JL  
9. Sello/estampa:

Stamp:

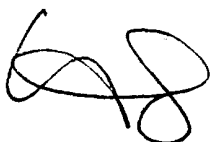


10. Firma:  
ROSS MILLER  
Secretario de Estado

F. Lincoln

Traducido por: Heather Hayes  
C.I.: 171984771-5

**NOTARIA PRIMERA DE QUITO: RECONOCIMIENTO DE FIRMA.-** En la ciudad del Distrito Metropolitano de Quito, Capital de la República del Ecuador, hoy **Martes CUATRO DE DICIEMBRE DEL AÑO DOS MIL DOCE**; ante mí, **doctor JORGE MACHADO CEVALLOS, NOTARIO PRIMERO DEL CANTON QUITO**, comparece: la señora **HEATHER HAYES**, por sus propios y personales derechos, portadora de la C.I. No. **171984771-5**.- La compareciente es de nacionalidad estadounidense, de estado civil casada, domiciliada en esta ciudad de Quito, mayor de edad, legalmente capaz, a quien de conocer doy fe; en virtud de haberme exhibido su cédula de identidad que en fotocopia certificada por mí, se agrega a esta diligencia; y advertida que fue de la obligación que tiene de decir la verdad y de la gravedad de las penas por perjurio con juramento y por su honor declara que reconoce como suya propia la firma y rúbrica puesta al pie del documento denominado "**CERTIFICADO DE EXISTENCIA LEGAL DE LA CIA. HERBALIFE INTERNATIONAL INC.**", que antecede, quien declara que su firma es "**ilegible**", siendo la única que utiliza en todos sus actos públicos como privados. Así mismo declara la compareciente que el documento que antecede fue traducido por ella, del idioma inglés al idioma español por conocer ambos idiomas.- Para constancia suscribe al pie de esta diligencia la misma que la celebro al amparo de lo dispuesto en el Artículo dieciocho de la Ley Notarial. Se archiva una fotocopia en el Libro de Diligencias de esta Notaria.- **DILIGENCIA No. 6659--- n.o.**



**f) SRA. HEATHER HAYES**

**C.I. No. 171984771-5**



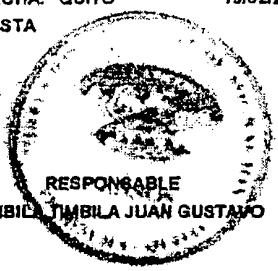
**Dr. Jorge Machado Cevallos**  
Notario Primero del Cantón Quito

Nº EXPEDIENTE:  
LUGAR Y FECHA: QUITO  
VALIDO HASTA

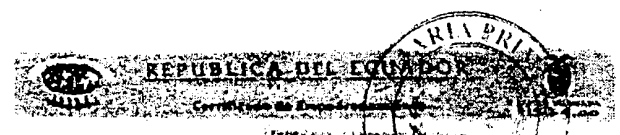
15/02/2008



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RESPONSABLE  
POLI TIMBIL TIMBILA JUAN GUSTAVO



HAYES HEATHER  
LYNN

NACIONALIDAD: ESTADOS UNIDOS

PASAPORTE: 088712181

C.I: 1719847715

VISA: 10-V

REG. Nº: 322219173210

ACTIVIDAD: DOCTORA EN LITERATURA

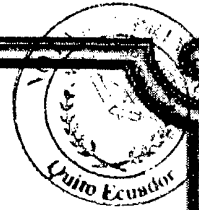
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# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HERBALIFE INTERNATIONAL, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 26, 1985, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 13, 2012.

A handwritten signature in black ink.

ROSS MILLER  
Secretary of State



Certified By: Joann Larson  
Certificate Number: C20120911-1364  
You may verify this certificate  
online at <http://www.nvsos.gov/>

# SECRETARY OF STATE



*[Handwritten signature]*

## APOSTILLE

(Convention de La Haye du 5 octobre 1961)

1. Country: *United States of America*

This public document

2. has been signed by JOANN LARSON

3. acting in the capacity of CERTIFICATION CLERK

4. bears the seal/stamp of STATE OF NEVADA

CERTIFIED

5. at *Carson City, Nevada, U.S.A.*

6. the THIRTEENTH DAY OF SEPTEMBER, 2012

7. by **ROSS MILLER**, *Secretary of State, State of Nevada, U.S.A.*

8. 2013/53/JL

10. Signature:

9. Seal/Stamp:



By

ROSS MILLER  
Secretary of State

*[Handwritten signature]*  
*[Handwritten signature]*

F. Lincoln

STATE OF NEVADA

ROSS MILLER  
Secretary of State



OFFICE OF THE  
SECRETARY OF STATE

Certified Copy

SCOTT W. ANDERSON  
Deputy Secretary  
for Commercial Recordings



September 13, 2012

Job Number: C20120911-1364  
Reference Number: 00003659122-58  
Expedite:  
Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

| Document Number(s) | Description | Number of Pages  |
|--------------------|-------------|------------------|
| 20090646264-69     | Annual List | 1 Pages/1 Copies |
| 20100624902-66     | Annual List | 2 Pages/1 Copies |
| 20110667999-30     | Annual List | 2 Pages/1 Copies |
| 20120578081-74     | Annual List | 2 Pages/1 Copies |

Respectfully,

ROSS MILLER  
Secretary of State



Certified By: Joann Larson  
Certificate Number: C20120911-1364  
You may verify this certificate  
online at <http://www.nvsos.gov/>

Commercial Recording Division  
202 N. Carson Street  
Carson City, Nevada 89701-4069  
Telephone (775) 684-5708  
Fax (775) 684-7138

(PROFIT) INITIAL LIST OF OFFICER, DIRECTORS AND REGISTERED AGENT OF

Herbalife International, Inc.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

9/2009

TO

9/2010

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

The Prentice-Hall Corporation System, Nevada, Inc.  
502 East John Street  
Carson City, NV 89706

A FORM TO CHANGE REGISTERED AGENT INFORMATION CAN BE FOUND ON OUR WEBSITE:  
www.nvsos.gov

|                        |                      |
|------------------------|----------------------|
| Filed in the office of | Document Number      |
| Ross Miller            | 20090646264-69       |
| Secretary of State     | Filing Date and Time |
| State of Nevada        | 08/27/2009 8:55 AM   |
|                        | Entity Number        |
|                        | C6434-1985           |



USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**\*\*YOU MAY NOW FILE YOUR INITIAL LIST ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the \$125.00 filing fee. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business.
5. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
6. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
7. Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE: \$125.00 LATE PENALTY: \$75.00

**CHECK ONLY IF APPLICABLE**

☐ This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_

☐ This publicly traded corporation is not required to have a Central Index Key number.

|                                   |                              |       |          |
|-----------------------------------|------------------------------|-------|----------|
| NAME                              | TITLE(S)                     |       |          |
| Michael O. Johnson                | PRESIDENT (OR EQUIVALENT OF) |       |          |
| ADDRESS                           | CITY                         | STATE | ZIP CODE |
| 800 West Olympic Blvd., Suite 406 | Los Angeles                  | CA    | 90015    |
| NAME                              | TITLE(S)                     |       |          |
| Brett R. Chapman                  | SECRETARY (OR EQUIVALENT OF) |       |          |
| ADDRESS                           | CITY                         | STATE | ZIP CODE |
| 800 West Olympic Blvd., Suite 406 | Los Angeles                  | CA    | 90015    |
| NAME                              | TITLE(S)                     |       |          |
| Richard P. Goudis                 | TREASURER (OR EQUIVALENT OF) |       |          |
| ADDRESS                           | CITY                         | STATE | ZIP CODE |
| 800 West Olympic Blvd., Suite 406 | Los Angeles                  | CA    | 90015    |
| NAME                              | TITLE(S)                     |       |          |
| Michael O. Johnson                | DIRECTOR                     |       |          |
| ADDRESS                           | CITY                         | STATE | ZIP CODE |
| 800 West Olympic Blvd., Suite 406 | Los Angeles                  | CA    | 90015    |

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 380.780 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X

Signature of Officer

Title  
Corporate Secretary

Date  
8/14/09

Nevada Secretary of State Initial List Profit  
Revised: 7-1-08

(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:

HERBALIFE INTERNATIONAL, INC.

NAME OF CORPORATION

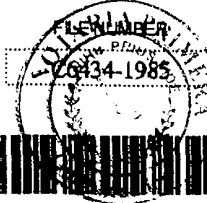
FOR THE FILING PERIOD OF 9/2010 TO 9/2011

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

THE PRENTICE-HALL CORPORATION SYSTEM, NEVADA, INC.  
(Commercial Registered Agent)  
502 EAST JOHN STREET  
CARSON CITY, NV 89706 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: [www.nvsos.gov](http://www.nvsos.gov)



\*110101\*

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|------------------------|----------------------|
| Filed in the office of | Document Number      |
| Ross Miller            | 20100624902-66       |
| Secretary of State     | Filing Date and Time |
| State of Nevada        | 08/20/2010 1:05 PM   |
|                        | Entity Number        |
|                        | C6434-1985           |

(This document was filed electronically)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE**

- ☐ Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code:
- ☒ Month and year your State Business License expires: 05 2011
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:
- ☒ This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity
- 002 - 501(c) Nonprofit Entity
- 003 - Home-based Business
- 004 - Natural Person with 4 or less rental dwelling units
- 005 - Motion Picture Company
- 006 - NRS 680B.020 Insurance Co.

|                                             |                                          |             |                   |
|---------------------------------------------|------------------------------------------|-------------|-------------------|
| NAME<br>MICHAEL O JOHNSON                   | TITLE(S)<br>PRESIDENT (OR EQUIVALENT OF) |             |                   |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |
| NAME<br>BRETT R CHAPMAN                     | TITLE(S)<br>SECRETARY (OR EQUIVALENT OF) |             |                   |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |
| NAME<br>JOHN DESIMONE                       | TITLE(S)<br>TREASURER (OR EQUIVALENT OF) |             |                   |
| ADDRESS<br>800 WEST OLYMPIC BLVD. SUITE 406 | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |
| NAME<br>MICHAEL O JOHNSON                   | TITLE(S)<br>DIRECTOR                     |             |                   |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

JAMES BERKLAS

X

Title  
ASSISTANT CORPORATE SECRETARY

Date  
8/20/2010 1:00:05 PM

Signature of Officer

Nevada Secretary of State Annual List Profit  
Revised: 8-5-09

**FILE NUMBER**

~~C6434-1985~~

| NAME                             |  | TITLE(S)    |  | DIRECTOR |       |
|----------------------------------|--|-------------|--|----------|-------|
| RICHARD GOUDIS                   |  |             |  |          |       |
| ADDRESS                          |  | CITY        |  | ST       | ZIP   |
| 800 WEST OLYMPIC BLVD. SUITE 406 |  | LOS ANGELES |  | CA       | 90015 |
| NAME                             |  | TITLE(S)    |  |          |       |
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| NAME                             |  | TITLE(S)    |  |          |       |
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| ADDRESS                          |  | CITY        |  | ST       | ZIP   |
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(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:

HERBALIFE INTERNATIONAL, INC.

NAME OF CORPORATION

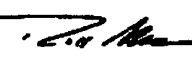
FOR THE FILING PERIOD OF 9/2011 TO 9/2012

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

THE PRENTICE-HALL CORPORATION SYSTEM, NEVADA, INC.  
(Commercial Registered Agent)  
2215-B RENAISSANCE DR  
LAS VEGAS, NV 89119 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: [www.nvsos.gov](http://www.nvsos.gov)

|                                                                                                                                                                      |                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Filed in the office of<br><br>Ross Miller<br>Secretary of State<br>State of Nevada | Document Number<br><b>20110667999-30</b>          |
|                                                                                                                                                                      | Filing Date and Time<br><b>09/14/2011 3:09 PM</b> |
|                                                                                                                                                                      | Entity Number<br><b>C6434-1985</b>                |
|                                                                                                                                                                      |                                                   |

(This document was filed electronically)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE**

- ☐ Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code:
- ☐ Month and year your State Business License expires:  20
- ☐ This corporation is a publicly traded corporation. The Central Index Key number is:
- ☐ This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
002 - 501(c) Nonprofit Entity  
003 - Home-based Business  
004 - Natural Person with 4 or less rental dwelling units  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

|                                             |                                          |
|---------------------------------------------|------------------------------------------|
| NAME<br>MICHAEL O JOHNSON                   | TITLE(S)<br>PRESIDENT (OR EQUIVALENT OF) |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      |
|                                             | STATE<br>CA                              |
|                                             | ZIP CODE<br>90015                        |
| NAME<br>BRETT R CHAPMAN                     | TITLE(S)<br>SECRETARY (OR EQUIVALENT OF) |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      |
|                                             | STATE<br>CA                              |
|                                             | ZIP CODE<br>90015                        |
| NAME<br>JOHN DESIMONE                       | TITLE(S)<br>TREASURER (OR EQUIVALENT OF) |
| ADDRESS<br>800 WEST OLYMPIC BLVD. SUITE 406 | CITY<br>LOS ANGELES                      |
|                                             | STATE<br>CA                              |
|                                             | ZIP CODE<br>90015                        |
| NAME<br>RICHARD GOUDIS                      | TITLE(S)<br>DIRECTOR                     |
| ADDRESS<br>800 WEST OLYMPIC BLVD. SUITE 406 | CITY<br>LOS ANGELES                      |
|                                             | STATE<br>CA                              |
|                                             | ZIP CODE<br>90015                        |

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

JIM BERKLAS

X

Signature of Officer

Title  
ASST. CORPORATE SECRETARY

Date  
9/14/2011 3:04:46 PM

Nevada Secretary of State Annual List Profit  
Revised: 8-5-09

## 11

C6434-1985

[illegible]

12

**(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND  
STATE BUSINESS LICENSE APPLICATION OF:**

HERBALIFE INTERNATIONAL, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF 9/2012 TO 9/2013

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

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THE PRENTICE-HALL CORPORATION SYSTEM, NEVADA, INC.  
(Commercial Registered Agent)  
2215-B RENAISSANCE DR  
LAS VEGAS, NV 89119 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: [www.nvsos.gov](http://www.nvsos.gov)

FILE NUMBER

C6434-1985



|                                                                                    |                                                                                                                                      |
|------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Filed in the office of<br><br>Ross Miller<br>Secretary of State<br>State of Nevada | Document Number<br><b>20120578081-74</b><br>Filing Date and Time<br><b>08/22/2012 11:43 AM</b><br>Entity Number<br><b>C6434-1985</b> |
|------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|

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☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

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- 005 - Motion Picture Company
- 006 - NRS 680B.020 Insurance Co.

|                                             |                                          |             |                   |
|---------------------------------------------|------------------------------------------|-------------|-------------------|
| NAME<br>MICHAEL O JOHNSON                   | TITLE(S)<br>PRESIDENT (OR EQUIVALENT OF) |             |                   |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |
| NAME<br>BRETT R CHAPMAN                     | TITLE(S)<br>SECRETARY (OR EQUIVALENT OF) |             |                   |
| ADDRESS<br>800 W OLYMPIC BLVD STE 406, USA  | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |
| NAME<br>JOHN DESIMONE                       | TITLE(S)<br>TREASURER (OR EQUIVALENT OF) |             |                   |
| ADDRESS<br>800 WEST OLYMPIC BLVD. SUITE 406 | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |
| NAME<br>RICHARD GOUDIS                      | TITLE(S)<br>DIRECTOR                     |             |                   |
| ADDRESS<br>800 WEST OLYMPIC BLVD. SUITE 406 | CITY<br>LOS ANGELES                      | STATE<br>CA | ZIP CODE<br>90015 |

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 16 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

JAMES BERKLAS

X

Signature of Officer

Title

ASST. CORPORATE SECRETARY

Date

8/22/2012 11:38:48 AM

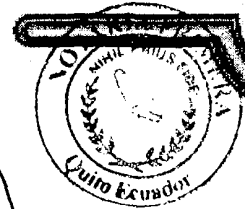
Nevada Secretary of State Annual List Profit  
Revised: 8-5-09

13

**FILE NUMBER**

A circular postmark from Porto Seguro, Brazil. The text "PORTO SEGURO" is at the top, "BRASIL" is at the bottom, and "1955" is in the center. The number "15" is visible in the bottom left corner.

# SECRETARY OF STATE



*[Handwritten signature]*

## APOSTILLE

(Convention de La Haye du 5 octobre 1961)

1. Country: *United States of America*

This public document

2. has been signed by JOANN LARSON

3. acting in the capacity of CERTIFICATION CLERK

4. bears the seal/stamp of STATE OF NEVADA

CERTIFIED

5. at *Carson City, Nevada, U.S.A.*

6. the THIRTEENTH DAY OF SEPTEMBER, 2012

7. by **ROSS MILLER**, *Secretary of State, State of Nevada, U.S.A.*

8. 2013/54/JL

10. Signature:

9. Seal/Stamp:



ROSS MILLER  
Secretary of State

*[Handwritten signature]*

F. Lincoln

By



República del Ecuador

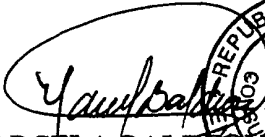
CONSULADO GENERAL DEL ECUADOR EN LOS  
ANGELES

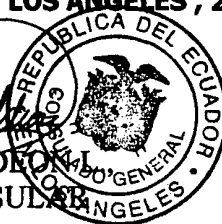


LEGALIZACION DE FIRMA N° 84 / 2012

Quien suscribe, **MARCELA BALDEON L., AGENTE CONSULAR**, en la ciudad de LOS ANGELES, ESTADOS UNIDOS AMERICA, certifica que la firma de **F. LINCOLN, NOTARIO PUBLICO DEL ESTADO DE NEVADA** que aparece en este documento original, es la misma que consta en los registros de este Consulado, por lo tanto certifico que es auténtica, a fin de que el indicado documento de fe pública en el Ecuador.

LOS ANGELES, 28 de septiembre de 2012.

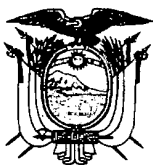
  
MARCELA BALDEON L.  
AGENTE CONSULAR



Arancel Consular: III 15.8  
Valor: \$50,0000

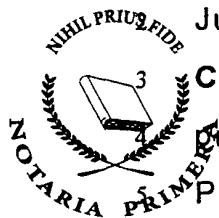


ESPACIO  
EN  
BLANCO



**DR. JORGE MACHADO CEVALLOS**

1 RAZON DE PROTOCOLIZACION: A petición del Estudio  
Jurídico JASOL CIA. LTDA.; Yo, **DOCTOR JORGE MACHADO**  
3 **CEVALLOS, NOTARIO PRIMERO DEL CANTON QUITO,**  
Protocolizo en el Registro de escrituras públicas de la Notaría  
Primera de este Cantón a mi cargo, en **dieciséis** fojas útiles,  
6 **EL CERTIFICADO DE EXISTENCIA LEGAL DE LA CIA.**  
7 **HERBALIFE INTERNATIONAL INC. Y SU DEBIDA**  
8 **TRADUCCION AL ESPAÑOL.-** Quito, a cuatro de Diciembre del  
año dos mil doce.

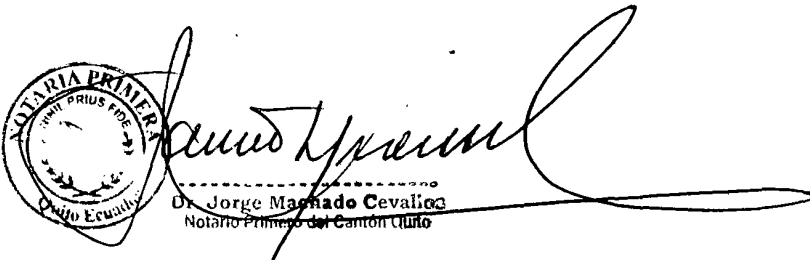


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11  
12 **DR. JORGE MACHADO CEVALLOS**  
13 **NOTARIO PRIMERO DEL CANTON QUITO**



14  
15  
16  
17  
18 Se protocolizó ante mí y  
19 en fe de ello confiero esta PRIMERA COPIA CERTIFICADA DEL  
20 CERTIFICADO DE EXISTENCIA LEGAL DE LA CIA. HERBALIFE  
21 INTERNATIONAL INC. Y SU DEBIDA TRADUCCION AL ESPAÑOL;  
22 debidamente firmada y sellada en Quito, a diez de Diciembre del año  
23 dos mil doce.-



24  
25  
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28   
Dr. Jorge Machado Cevallos  
Notario Primero del Cantón Quito