Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170002297043)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Phone : (954)208-0845 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## FOREIGN PROFIT/NONPROFIT CORPORATION SFD TRANSPORTATION CORP.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
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## **COVER LETTER**

| TO:     | Registration Section Division of Corporations  |  |
|---------|--|--|
| SUBJ    | FCT: SFD TRANSPORTATION CORP.  |  |
| 5000    |  | oration - must include suffix  |
| Dear S  | ir or Madam:   |  |
| "Certif | iclosed "Application by Foreign Corporation<br>ficate of Existence," or "Certificate of Good<br>referenced foreign corporation to transact b | on for Authorization to Transact Business in Florida," of Standing" and check are submitted to register the business in Florida. |
| Please  | return all correspondence concerning this r  | matter to the following:   |
| Gary K  | Kaip   |  |
|         | Nan  | me of Person   |
| Sherve  | ood Food Distributors, L.L.C.  |  |
|         | Firm   | n/Company  |
| 12499   | Evergreen Ave  |  |
| _       |  | Address  |
| Detroi  | i, MI - 48228  |  |
|         | City/S   | State and Zip code   |
| gkarp@  | gsherwoodfoods.com   |  |
|         | E-mail address: (to be   | used for future annual report notification)  |
| For fu  | rther information concerning this matter, pl   | lease call:  |
| Jessica | Hale 213   | 337-4611   |
|         | Name of Person Area  | a Code Daytine Telephone Number  |
|         | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301    | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314                               |
| Enclos  | sed is a check for the following amount:   |  |
| ☐ \$70  | 0.00 Filing Fee  |  |

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| (If name unavaila                       | ible in Fiorida, enter alternate corporate name ad  | opted for the purpose of transacting business in Florida) |
|---|---|---|
| Delaware                                | ત્ર   |   |
| (State or country 03/07/2017            | y under the law of which it is incorporated)  |   |
| (Date 4/3/2017                          | of incorporation)   | (Date of duration, if other than perpetual)               |
| 12499 Evereren                          | (Date first transacted business in F<br>(SEE SECTIONS 607.1501 & 607.150)<br>Ave, Detroit, MI - 48228 |   |
|   |   | office address)   |
| + 164 1· 11 dd da i Mil 1 ddd d Garress | (6)   | address, if different)                                    |
| Name:                                   | t address of Florida registered agent: (P.O.  CT Corporation System  1200 South Pine Island Road      | Box NOT acceptable)                                       |
| fice Address:                           | Plantation  | Florida 33324   |
|   | (City)  | , Florida<br>(Zip code)                                   |

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

٠,٠

|  | FILED                                      |
|--|--|
| 1. Names and business addresses of officers and/or directors:  | 2017 4110                                  |
| A. DIRECTORS   | 2017 AUG 25 AM 11: C                       |
| Chairman:  | TALLARY OF                                 |
| Address:   | SELAHASSEE I LONG                          |
| /ice Chairman:   |  |
| Address:   |  |
| Director:  |  |
| Address:   |  |
| Director:  |  |
| Address:   |  |
| 3. OFFICERS  |  |
| resident:  |  |
| Address: 12499 Evergreen Ave. Deuoit, MI - 48228   |  |
| fice President: Gary Kam   |  |
| address: 12499 Evergreen Ave, Detroit, MI - 48228  |  |
| Douglas Golden   |  |
| ddress: 12499 Evergreen Ave, Detroit, MI - 48228   |  |
| reasurer:  |  |
| Address:   |  |
| NOTE: If necessary, you may attach an addendum to the application listing ac   | lditional officers and/or directors.       |
| 12. Signature of Director or Officer   |  |
| The officer or director signing this document (and who is listed in number 11 a are true and that he or she is aware that false information submitted in a document third degree felony as provided for in s.817.155, F.S. | bove) attirms that the facts stated herein |
| 3. Gary Karp   |  |



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SFD TRANSPORTATION CORP." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF AUGUST, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



6339697 8300

SR# 20175831958
You may verify this certificate online at corp.delaware.gov/authver.shtml

). . .

Authentication: 203098941

Date: 08-22-17