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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sunrise Brand Management Specialists, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Gia Magliocco
Name of Person
Sunrise Brand Management Specialists, LLC
Firm/Company
770 Tilton Road
Address
Sebastopol, CA 95472
City/State and Zip Code
gia@sunrisemanagement.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gia Magliocco _{at (} 707 ₎ 824-9889
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\int_{125.00}\$ \text{Filing Fee} \int_{130.00}\$ \text{Filing Fee & Certificate of Status} \int_{155.00}\$ \text{Filing Fee & Certified Copy} \int_{155.00}\$ \text{Filing Fee & Certified Copy} \int_{155.00}\$

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

1.	Sunrise Brand Management Specialists, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")	n
2.	(Jurisdiction under the law of which foreign limited liability company is organized) 3. 22-3703498 (FEI number, if applicable)	
4.	December 1999 (Date of Organization) 5. N/A (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	We have not started yet (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.		
	770 Tilton Road, Sebastopol, CA 95472 (Street Address of Principal Office)	
8.	If limited liability company is a manager-managed company, check here	
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Robert Tepper: 770 Tilton Road, Sebastopol, CA 95472	
	Gia Magliocco: 770 Tilton Road, Sebastopol, CA 95472	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)	1
11	. Nature of business or purposes to be conducted or promoted in Florida:	
	We will be importing Bioitalia Wine from Italy and selling to Tree of Life Distribution.	
	Signature of a member or an authorized representative of a member.	
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	

Typed or printed name of signee

Robert Tepper

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailab	ole, the alternate to be used in the state of Florida is:	
2. The nam	te and the Florida street address of the registered agent and office are:	
	CT Corporations System	
	(Name)	
	1200 South Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation, 33324 FL City/State/Zip	
	City/State/Lip	

relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

> Special Asst. Secretary 90.00 Filling Fee for Application Designation of Registered Agent \$ 30.00 Certified Copy (optional) Certificate of Status (optional) 5.00

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

SUNRISE BRAND MANAGEMENT SPECIALISTS, L.L.C.

0600080734

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 28, 1999.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Robert Tepper 770 Tilton Road Sebastopol, NJ 95472

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Certification# 120526831

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 23rd day of May, 2011

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp