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SECRETARY OF STATE, TALL AHASSEE, FLOUIS,

JUN 0 9 2016 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sweet Candy Company 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:
Kristin Zaal Name of Person
Sweet Candy Company
Firm/Company 1324 Schofield Ave. Ste, 207 Address Schofield WI 54476
Schof, eld, W154476 w. City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kristin Zaal at (717) 945-4048 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigcup \\$125.00 \text{ Filing Fee} \Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status} \Bigcup \\$155.00 \text{ Filing Fee & Certified Copy} \Bigcup \\$160.00 \text{ Filing Fee, Certificate of Status & Certified Copy} \end{array}\$

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SU COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	IBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
Sweet Candu Company	1 L L C
(Name of Foreign Limited Liability Company; must include "Limited Liabil	Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business	in Florida. The alternate name must include "Limited
Liability Company," "L.L.C," or "LLC.")	E1007117
	(FEI number, if applicable)
company is organized)	
4. (Date first transacted business in Florida, if prior to n (See sections 605.0904 & 605.0905, F.S. to determine p	egistration.) penalty liability)
5. 1324 Schofield Ave, Stc. 20	7
Schof, eld, w/ 54476 (Street Address of Principal Office)	<u> </u>
6. 1324 Schofield Aug. Ste 2	-07 7
Scholield, W1 54476	
(Mailing Address)	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptal	ble)
Name: Alex Fitting	
Office Address: 1950 S. Conway Rd.	Unit 5
Orlando.	, Florida <u>32812</u> (Zip code)
(City) (City)	(Zip code)
Having been named as registered agent and to accept service of process for the designated in this application, I hereby accept the appointment as registered ag to complywith the provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent. (Registered agent 8 signature)	ent and agree to act in this capacity. I further agree
8. The name, title or capacity and address of the person(s) who has/have authorit	ty to manage is/are.
Paul Zaal + Kristin Zaal	Member / Vice President
3906 Wender Lane	(Paul) (Kristin)
Weston W1 54476	
9. Attached is a certificate of existence, no more than 90 days old, duly authentical jurisdiction under the law of which it is organized. (If the certificate is in a foreign of the translator must be submitted)	ated by the official having custody of records in the n language, a translation of the certificate under oath
_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Signature of an authorized person	
This document is executed in accordance with section 605.0203 (1) (b), Florida S submitted in a document to the Department of State constitutes a third degree felority.	tatutes. I am aware that any false information ny as provided for in s.817.155, F.S.
Paul Zaal Typed or printed name of signee	
r Abed or fruited name or signee	

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS





To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

SWEET CANDY COMPANY LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is September 30, 2015.

I further certify that said corporation or limited liability company has not yet completed its initial report; year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 18370120. Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.

> IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on May 17, 2016.

GEORGE PETAK, Administrator Division of Corporate and Consumer Services Department of Financial Institutions



DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

176343-99D5AAC8