F0000006070

TRANSMITTAL LETTER

To: Registration Division of (
SUBJECT:	outheastern (Name of corn	Baking Co poration - must include suffi	ompany luc-
Dear Sir or Madam:			
The enclosed "Applic "Certificate of Exister transact business in F	ice, and check are submitte	on for Authorization to Transed to register the above refer	sact Business in Florida", renced foreign corporation to
Please return all corre	Jete 1 Na Doutheaste 10 Summ Jatkinsvill	matter to the following: 4 [- odice me of Person) m/Company) Address) e God 30 y/State/Zip)	000034410544 -10/26/0001098001
Should you need to call Lete Lod (Name of Pers	someone concerning this n	natter, please call: 6	SECRETA OF STALLAND SHORE NUMBER, FL
STREET ADDRESS:	,	MAILING ADDRES	9: 26 TATE ORIDA
Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399	s	Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for t	he following amount:		10
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

T. PLOKIDA
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.
REGISTER A FOREIGN CORPORATION TO THE FOLLOWING IS SUPER
ONATION TO TRANSACT RUSINESS IN THE SECURING IS SUBMITTED TO
(Name of corporation; must include the word "INCORPORATION" Ompany INC.
(Name of corporation)
Words of corporation; must include the word "INCORPORTION ON O
WOLUS DE ADDRESSA COM CONTRACTOR A LET C
natural person or portraction import in language as will clearly indicate the state of the contraction of th
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
in the name at present.)
$\frac{2}{\sqrt{2}}$
(State or country under the law of which it is incorporated) 4. 1998 (FEI number, if applicable)
decraw of which it is incorporated)
4. (FEI number, if applicable)
4 () X
(Date of in. 5.
(Duration: Year corp. will
(Duration: Year corp. will cease to exist or "perpetual")
(Date first transacted by Dan Vary 2000)
(Date first transacted business in Florida and
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
upon qualification.")
7. a. 140 (1.155, F.S.)
1. 2. 1140 Sammit Circle
(Principal office address)
h (L)OTKingsisi)
b. Watkinsville an 2017
(Current mailing addless)
(Purpose(s) of corporation authorized by 1000 mg/s
authorized in home state or country to be
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name and street address of Florida
of Florida registered agent: (P.O. Power N. 1875)
Description of Mail Drop Box NOT according to
Name: +0+0
Office Address: 1540 12th C1 17
Office Address: 1540 12Th Street E
1 January L
-Lainetta Ll 31-11
Florida 34221-4185
(Zip code)
10. Registered agent's
10. Registered agent's acceptance:
Having have
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated comply with the provisions of all statutes relative to the proper and agree to act in this capacity. I further a
in inis application. I hereby account to uccept service of process for the all
comply with the annual of the application of the ap
" we provisions of all statutek religion to his secrete agent and agree to act in this arm in the place designated
in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to accept the appointment as registered agent and agree to act in this capacity. I further agree to and accept the obligations of my position as registered agent and complete performance of my duties, and I agree to
of my position as registered adont
comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with
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- 1th W

11. 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.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: tete Lodice
Address: 1540 12th Street E
- Palmetto, Fla. 34221-4185
Vice Chairman:
Address:
Director: Tim O'Dea
Address: 1540 12th Street E
Palmetto, Fla. 34221-4185
Director:
Address:
B. OFFICERS
President: <u>tete</u> <u>dodice</u>
Address: 1540 12th Street E
-talmetto, +1a. 34221-485=
Vice President: Dea
Address: 1540 12th Street E
- talmetto, Fla. 34221-47868
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.
15 X /\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
(Typed or printed name and capacity of person signing application)
and capacity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER DOCKET NUMBER : 002970132 CONTROL NUMBER : K947565 DATE INC/AUTH/FILED: 11/17/1999 JURISDICTION : GEORGIA PRINT DATE : 10/23/2000

FORM NUMBER

SOUTHEASTERN BAKING CO., INC. PETE IODICE 1140 SUMMIT CIRCLE WATKINSVILLË, GA 30677

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

SOUTHEASTERN BAKING COMPANY, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated has not filed articles of dissolution, certificate of cancellation or any other similar document with the of the Secretary of State.

This certificate relates only to the legal existence of the bovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the secretary

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in



Cathy Cox Secretary of State