F0200000243

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Nuciwafer USA Comp	nany	
	rporation - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporati "Certificate of Existence", and check are submitt to transact business in Florida.	ion for Authorization to Transact Business in Florida', tted to register the above referenced foreign corporation	
Please return all correspondence concerning this	s matter to the following:	
Sonya	G. Heiser □ □ □	
·	fame of Person)	
Holcher & Af	filiated Companies	
(Fi	irm/Company) wnt.	-
1000 Tamiam	ni Trail N., Stite 502)
	(Address)	15
Naples,	Florida 34106	
· · · · · · · · · · · · · · · · · · ·	/State and Zip code) 5000	
For further information concerning this matter, pl	/State and Zip code) 500004733096- -12/26/01-01071-01071-010818	2 13 8.75
Sonya Heiser at (92 (Name of Person) (41) 649-7227 (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee		



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 28, 2001

SONYA G. HEISER 1000 TAMIAMI TRAIL N., STE 502 NAPLES, FL 34106

SUBJECT: NUCIWAFER USA COMPANY

Ref. Number: W01000029519

We have received your document for NUCIWAFER USA COMPANY and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificateof existence from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 701A0006738

02 JAN 15 AN 2:4

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.

1.	Nuciwafer USA Company
	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or 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.)
2.	Mississippi (State or country under the law of which it is incorporated) 3. 64-0944746 (FEI number, if applicable)
4.	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	upon qualification
	(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.)
7	1150 Power Street, Suite 5, Naples, Florida 34104
	(Principal office address)
	1150 Power Street, Suite 5, Naples, Florida 34104
•	(Current mailing address)
	· · · · · · · · · · · · · · · · · · ·
8.	sale and distribute snack foods
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
0	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: Max A. Holcher
Of:	fice Address: 1000 Tamiami Trail N., Suite 502
	Naples, Florida 23106
	Naples, Florida 23106 F F
	(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at 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 comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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:

Chairman:	Carlos Perez
Address:	1150 Power Street, Suite 5, Naples, FL 34104
Vice Chairman	Max A. Holcher
Address:	1000 Tamaimi Trail North, Suite 502, Naples, FL 34106
Director:	Carlos Perez
Address:	1150 Power Street, Suite 5, Naples, FE 34104
Director:	Max A. Holcher
Address:	1000 Tamiami Trail North, Suite 502, Naples, FL 34106
	RS
President:	Carlos Perez
Address:	1150 Power Street, Suite 5, Naples, FL 34104 PS 2
Vice President:	Max A. Holcher
	1000 Tamiami Trail N., Suite 502, Naples, FL 34106 = = =
Secretary:	Carlos Perez
Address:	1150 Power Street, Suite 5, Naples, FL 34104
	Max A. Holdher
Address:	1000 Tamiami Trail N., Suite 502, Naples, FL 34106
. 1	cessary, you may attach an addendum to the application listing additional officers and/or directors.
13.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	May A Holekan
	Max A. Holcher (Typed or printed name and capacity of person signing application)

State of Mississippi

Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi



CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on July 24,2001 the state of Mississippi issued a Charter/Certificate of Authority to:

NUCIWAFER USA COMPANY

That the state of incorporation is MISSISSIPPI.

That the period of duration is Perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my hand and seal of office January 04,2002

Eric Clark

ERIC CLARK, Secretary of State

