

Capitol Se

1406 Hays St., Suite

Tallahassee, FL 32301

(850) 878-4734
Kathi or Brent

F02000000750

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Sweet Dreams Ice Cream, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2/12 ☒ Certified copy
- ☐ Mail Out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☒ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

FILED
FEB 12 PM 12:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

RECEIVED
FEB 12 AM 11:02
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BK

100004911001--7
-02/12/02--01020--025
*****78.75 *****78.75

**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. Sweet Dreams Ice Cream, Inc.

(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. Georgia

(State or country under the law of which it is incorporated)

3. 80-0004895

(FEI number, if applicable)

4. 12/31/2001

(Date of incorporation)

5. Perpetual

(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. 620 Falls Lake Drive

(Principal office address)

Alpharetta, GA 30022

(Current mailing address)

8. Ice Cream Shop

(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: Paralegal & Attorney Service Bureau, Inc.

Office Address: 1406 Hayes Street, Suite 2


Tallahassee, Florida 32301

(City)

(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)

Kathleen J. Hill, Pres

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: Barry GoldAddress: 620 Falls Lake DriveAlpharetta, GA 30022

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Barry GoldAddress: 620 Falls Lake DriveAlpharetta, GA 30022

Vice President: _____

Address: _____

Secretary: Barry GoldAddress: 620 Falls Lake Drive, Alpharetta, GA 30022Treasurer: Lisa BuchmanAddress: 620 Falls Lake Drive, Alpharetta, GA 30022**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. Barry Gold
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Barry Gold, President
(Typed or printed name and capacity of person signing application)FILED
02 FEB 12 PM 12:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

CONTROL NUMBER : 0155931
DATE INC/AUTH/FILED: 12/31/2001
JURISDICTION : GEORGIA
PRINT DATE : 02/11/2002
FORM NUMBER : 211

FILED
02 FEB 12 11:12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GREENBERG TRAURIG
GINA REEDER
3290 NORTHSIDE PARKWAY, N.W., SUITE 400
ATLANTA, GA 30327

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 as of the above print date

SWEET DREAMS ICE CREAM, INC.
A GEORGIA PROFIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. 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 of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and 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 this state.

20020211165713058



Cathy Cox

Cathy Cox
Secretary of State