# F020000033-43

TO: Registration Section Division of Corporations	
SUBJECT: KITCHEN CONNECTION, INC.  (Name of corporation - must include suffix)	IJH
Dear Sir or Madam: 00855-00310-00647-02963	,,,,,
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following: W02-1362	7
(Name of Person) 400005371104 -04/29/0201114- *****87.50 *****	-001
2000 - 64th AV5 S.	
ST. POTENS BWG_ R 337/Z	
(City/State and Zip code)	
For further information concerning this matter, please call:	
(Name of Person)  at (813) 215-1751 Fig. 82 Fig. (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  RAILING 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 ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,  Certificate of Status Certified Copy  Certified Copy	



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 7, 2002

TIMOTHY KING KITCHEN CONNECTION, INC. 2000 64TH AVE. S. ST. PETERSBURG, FL 33712

SUBJECT: KITCHEN CONNECTION, INC.

Ref. Number: W02000013027

We have received your document for KITCHEN CONNECTION, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 302A00028541

#### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned TimoTHI J. Linco , do hereby certify (Name)	
that this Resolution of the Board of Directors of <u>KITCHEN CONNECTION</u> , FINC.	
(Corporate Name)	_
a corporation duly organized and existing under the laws of the State of DELAWALES,	
was duly adopted on MAY 10 , 2002 .	
Be it resolved, that LITCHEN CONNECTION, FUC.	
(Corporate Name)	
organized and existing in the State of DELAWALIS, hereby adopts the name	
CITCHEN CONVECTION-GULF COAST, INC. for use in Florida.	
Dated: 511 02	
Signature of either Chairman, Vice Chairman or any officer	
Type or print name	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA $\cdot$

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. KIEHEN CONVECTION, INCORPORDITO
(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. DELAWARD 3. 02-05-70017
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3120102 5. VERPETURE
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. OVOU GUNLIFICATION
(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. 9 E. LOCKERMANT + 205 DWAL DELAUMO, 79901
2000 COUT AJE SOTH, ST. POTENSBURG, FL 33712
(Current mailing address)
8. ADY LAWFUL ACT OR ACTIVITY
(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: TIMOTHY LIX
Office Address: 2000 64 AUS.
1501000
The state of the s
(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)

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: Name's and business addresses of officers and/or directors:		
A. DIRECTORS		_
Chairman: TIMOTHY LIDG  Address: ZOOC COY HO NW S.	<del>-</del>	. 7
Address: 2000 Co4 th WW 5.	<del></del>	-
St. Relevis Bullo FL 33717		
- m/A		
		·==
Address:	Tu	**
Director — W/M	. M. 1962	
Director: P(Y)		=
Address:		=
		-
Director: W/A	<del></del>	
Address:		. =
		. =
B. OFFICERS	-	_
W V.~		_
7 con retto in a Single		
		, <del>=</del>
ST. POTELSBORG, FL 33712		
Vice President: NOG WA KING		
Address: 2000 Louts ADO - SOUTH	-1.	
5T. PETELSBURG. FL 755712		<u> =</u>
Secretary: DAMS AS PIES.		- - 運
A 3 division		
Treasurer: SAWO AS Pres-		
		-25-
Address:	777	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
		-
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	<del></del>	r <u>=</u>
THOOTHY + VIV	<del></del>	
(Typed or printed name and capacity of person signing application)		-

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KITCHEN CONNECTION INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2002.



Harriet Smith Windsor, Secretary of State

3503492 8300

020363438

AUTHENTICATION: 1830411

DATE: 06-13-02