# F-078880000099

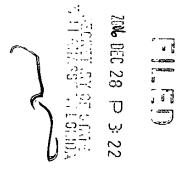
(Requestor's Name)					
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PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



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# **COVER LETTER**

TO: New Filing Section Division of Corporations				
SUBJECT: Bruegger's Enterpris	ses, Inc.			
	oration - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation" Certificate of Existence," and check are submitted transact business in Florida.				
Please return all correspondence concerning this r	matter to the following:			
Mark Coles		£1 .	7	
(Na	me of Person)		] 4	
Bruegger's Enterprises, Inc.		_==== .>==!	330	acceptants.
(Fir	m/Company)		28	<u> </u>
159 Bank Street			ָּט	
	(Address)	198	رب	1
Burlington, VT 05401		트린	22	
(City/s	State and Zip code)			
For further information concerning this matter, pl	ease call:			
(Name of Person) (A	Area Code & Daytime Telephone Nur	nber)		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing 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 & Certificate of Status	Certified Copy C	7.50 Fill ertificat ertified	te of Sta	

### '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.

	er's Enterprises, Inc.				
(Enter name of compared to the control of the contr	corporation; must include "INCORPORA Corp," "Inc," "Co," or "Corp.")	TED," "COMPANY," "CORPORAT	ION,"		
	• , , , , ,				
	able in Florida, enter alternate corporate		cting business in Florida)		
<sub>2.</sub> Delawar		_ <sub>3.</sub> <u>20-0081464</u>			
•	under the law of which it is incorporated	,	(FEI number, if applicable)		
<sub>4.</sub> July 7, 2		_ <sub>5.</sub> Perpetual	5. Perpetual		
(Date	e of incorporation)	(Duration: Year corp. will cease	e to exist or "perpetual")		
6					
		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liab	bility)		
<sub>7.</sub> 159 Bani	k Street, Burlington, V	T 05401			
· ·	(Principal offic	e address)			
Same					
	(Current mailin	g address)	,		
D-4-11 D	and Delegaine				
• •	agel Bakeries		P1 113		
(Purpose(s	s) of corporation authorized in home state	e or country to be carried out in state of	Florida)		
9. Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)			
Name:	CT Corporation Syst	tem			
Office Address:	1200 South Pine Isla	and Road	IF 11. 2006 DEC 2 SECRETAR		
	Plantation	Florida 33324			
	(City)	, Florida 33324 (Zip code)	17 7		
10 Pagistared or	gent's acceptance:		رب نے۔۔۔		
10. Registereu aț Having been nam	gent's acceptance: ed as registered agent and to accept.	service of process for the above sta	ted corporation at the place		
designated in this	application, I hereby accept the app	ointment as registered agent and ag	gree to act in this capacity. I		
further agree to co and I am familiar	omply with the provisions of all statu with and accept the obligations of n	ites relative to the proper and comp	lete performance of my duties		
	unu uccepi, me oongunons oj m	y posmon na registeren ngent			
	/ Va //	/_			
	/ Kelly Fred	LAUFEN H. KR			
_	(Registered agent's signa	SPECIAL ASSISTANTS	<del>ECPE</del> TARY		

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.

A. DIRECTORS Chairman: Address: \_\_\_\_ SEE ATTACHED LIST Vice Chairman: Address: \_\_\_\_ Director: \_ Address: \_\_\_ Director: \_\_\_\_ Address: \_\_\_ **B. OFFICERS** President: \_\_\_\_\_ Address: Vice President: Address: Secretary: Address: Treasurer: Address: \_\_ NOTE: If newspary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. Robert D. Parette, VP

(Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:

### Bruegger's Enterprises, Inc. Listing of Officers and Directors

### **Officers**

James Greco, CEO 159 Bank Street Burlington, VT 05401

David Austin, President 159 Bank Street Burlington, VT 05401

Robert Parette, VP, Treas., Secretary 159 Bank Street Burlington, VT 05401

Clarence E. Terry, VP 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486

T. Scott King, VP 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486

Kevin Calhoun, VP 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486

Michael J. McConvery, VP, Asst. Secretary 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486

### **Directors**

Kevin J. Calhoun 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486

Michael J. McConvery 5200 Town Center Circle, Suite 470 Boca Raton, FL 33486



# Delaware

PAGE 1

# The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRUEGGER'S ENTERPRISES, 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 NINETEENTH DAY OF DECEMBER, A.D. 2006.





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Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5290013

DATE: 12-19-06