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(Address)

(Address)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 AUG -4 PM 2:01

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CS. 8-4

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** L.P. Shanks Company  
(Name of corporation - must include suffix)

Dear Sir or Madam:

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:

Hugh Nelson  
(Name of Person)  
L.P. Shanks Company  
(Firm/Company)  
604 Industrial Blvd.  
(Address)  
Crossville, TN 38555  
(City/State and Zip code)

For further information concerning this matter, please call:

Hugh Nelson at ( 931 ) 484-5155 X 107  
(Name of Person) (Area Code & Daytime Telephone Number)

**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     \$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

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. L.P. SHANKS COMPANY (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. TENNESSEE (State or country under the law of which it is incorporated) 3. 62-0440897 (FEI number, if applicable)

4. 10-10-46 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. 7-15-08 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 624 Industrial Blvd Crossville TN 38555 (Principal office address)

624 Industrial Blvd Crossville TN 38555 (Current mailing address)

8. Wholesale distribution of grocery items (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 NOT acceptable)

Name: USA-RALLC

Office Address: 811 Prudential Dr. floor 12th Jacksonville Florida 32207 (City) (Zip code)

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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.

Mylo Jawender on Behalf of USA-RALLC (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.

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

**A. DIRECTORS**

2000 AUG -4 PM 2:01

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Scot Shanks

Address: 479 Waterview Drive

Crossville, TN 38555

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

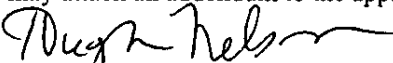
Secretary: Hugh Nelson

Address: 439 Earl Jones Road Crossville, TN 38555

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Hugh NELSON, Secretary

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

**Secretary of State**  
**Division of Business Services**  
**312 Eighth Avenue North**  
**6th Floor, William R. Snodgrass Tower**  
**Nashville, Tennessee 37243**

ISSUANCE DATE: 05/28/2008  
REQUEST NUMBER: 08149545  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 10/10/1946  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0028577  
JURISDICTION: TENNESSEE

TO:  
L P SHANK CO  
%LYNETTE CLEVELAND  
PO BOX 1068  
CROSSVILLE, TN 38557

REQUESTED BY:  
L P SHANK CO  
%LYNETTE CLEVELAND  
PO BOX 1068  
CROSSVILLE, TN 38557

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

-----  
"L. P. SHANKS COMPANY"  
-----

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

-----  
FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/28/08

FROM:  
HUGH NELSON  
439 EARL JONES RD

CROSSVILLE, TN 38555-3917

RECEIVED:            FEES  
                             \$120.00            \$0.00  
TOTAL PAYMENT RECEIVED:            \$120.00

RECEIPT NUMBER: 00004422125  
ACCOUNT NUMBER: 00602958



SS-4458

*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE