Page 1 of 1

Florida Department of State Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

FOREIGN PROFIT/NONPROFIT CORPORATION

Agrusa, Inc.

Certificate of Status	0
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6/25/2009

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.

I. AGRUSA, IN			H. (COMPANIES AND ACCORDANCE STORY)			
	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp,")	ED,	" "COMPANY," "CORPORATION,"			
	1					
(If name unevails	ble in Florida, enter alternate corporate m		adopted for the purpose of transacting business	in Florida)		
2. NEW JERSE		_ 3.	13-3405531			
(State or country t	under the law of which it is incorporated),		(FEI number, if applicable)			
4. APRIL 24, 19		. S.	perpetual			
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "p	erpetual")		
6.						
,			n Flurida, if prior to registration) 502, F.S., to determine penalty liability)			
7, 117 FORT LE	E ROAD, LEONIA, NJ 07605					
	(Principal office	acid	ress)			
117 FORT LE	E ROAD, P.D. BOX 287 LEO	N)/	A, NJ 07605			
	(Current mailing	ado	ress)			
8. WHOLESAL	E FOOD DISTRIBUTOR			SEC	2009 JUN	
(Furposo(s)	of corporation authorized in home state	or c	ountry to be carried out in state of Fforida)	AÆ	<u>_</u>	1
9. Name and street	t address of Florida registered agent:	(P.(). Box NOT acceptable)	RETARY AHASSEI	N	
Name:	C T Corporation System			SEE.	ĊĬ	
Office Address:	1200 South Pine Island Road				AM 10: 09	Ö
	Plantation		. Florida ³³³²⁴	ORID		
	(City)		(Zip cods)	Þ	w.	

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.

Joanne McCarthy
(Registered agent's signature)

Joanne McCarthy
Assistant Secretary

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 baving 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		
Chairman: JILL BUSH		
Address: 117 FORT LEE ROAD	· ·	
LEONIA, NJ 07605		
Vice Chairman;		
Address:		
Director;		
Address:		
Director:		
Address:		<u> </u>
		2009
3. OFFICERS	AHA AHA	
resident: JILL BUSH	TARY C	25
Address: 117 FORT LEE ROAD	m _{Cl}	₩ Hiệ
LEONIA, NJ 07605	유	_
/ice Prosident:	Dri	9
Address:	PT (4,000 to 11.000 to 10.000	
	· · · · · · · · · · · · · · · · · · ·	
ecrotary: JILL BUSH	······································	·
Address: 117 FORT LEE ROAD, LEONIA, NJ 07605		4 -A -T
reasurer: JILL BUSH		
Address: 117 FORT LEE ROAD, LEONIA, NJ 07605		
OTE: If necessary, you may attach an addendum to the application listing additional officers and/	or directors.	
3. (Signature of Director or Officer listed in number 12 of the application)		
4. JILL BUSH, PRESIDENT		
(Typed or printed name and capacity of person signing application)		

STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

AGRUSA, INC.

0100515820

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 24, 1992.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Jill G. Bush 117 Fort Lee Road Leonia, NJ 07605

ST THE STATE OF TH

Certification# 114561084

IN TESTIMONY WHEREOF, I have hereunta set my hand and affixed my Official Scal at Trenton, this 8th day of June, 2009

R. David Rousseau State Trensurer

Vorify this certificate at https://www.i.state.nj.us/TYTR_StandingCen/JSP/Verify_Cert.jsp