# F10000004647

(Re	equestor's Name)				
(Ac	ldress)				
(Ad	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
(Do	ocument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				
NO CH	O17				
Office Use Only					



200185271332

200185271332 10/21/10--01028--018 \*\*1400.00

09/15/10--01026--004 \*\*210.00

WO-43554



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#### **COVER LETTER**

TO: New Filing Section Division of Corporations						
SUBJECT: Cheesehead Incorporated						
·	ration - must include suffix					
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by						
Please return all correspondence concerning this m	natter to the following:					
Isaac Manzo						
Nam	ne of Person					
Manzo & Associates, P.A.						
Firm	/Company					
4767 New Broad Street						
/	Address					
Orlando, FL 32814						
City/St	tate and Zip code					
Manzo@lawyer.com						
E-mail address: (to be t	used for future annual report notification)					
For further information concerning this matter, ple	ease call:					
Isaac Manzo ot (407	514 2602					
Saac Manzo   at (407 ) 514-2692   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 & □ \$87.50 Filing Fee, Certified Copy □ Certificate of Status & Certified Copy					



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 16, 2010

ISSAC MANZO 4767 NEW BROAD STREET ORLANDO, FL 32814

SUBJECT: CHEESEHEAD INCORPORATED

Ref. Number: W10000043554

We have received your document for CHEESEHEAD INCORPORATED and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,400.00.

Please return your document, along with 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) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 310A00022040

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

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REGISTER A FOREIGN CORPORATION TO TRANSA		O COINESS IN	THE STATE OF FLORI		
Cheesehead Incorporated					_3
(Enter name of corporation; must include "INCORPORAT "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPAN	Y," "CORPORATION,"	3.5	7 20
					22
(If name unavailable in Florida, enter alternate corporate n	ame	adopted for th	e purpose of transacting bus	iness in Flo	ida)
_ Indiana		36-4448522			ထိ
(State or country under the law of which it is incorporated)	'		(FEI number, if applicable	e)	
6/11/2001	5.	Perpetual			
(Date of incorporation)	•	(Duration: \	ear corp. will cease to exist	or "perpetu	al")
June, 2004					
(SEE SECTIONS 607.1501 & 607.1501	07.1	502, F.S., to de	etermine penalty liability)		
(Principal office	add	recc)			
(Principal office	add	ress)			
10748 Sky Prairie Street Fishers, IN 46038					
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing					
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing Any and all lawful business	g ado	lress)	wind out in state of Florida		
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing	g ado	lress)	rried out in state of Florida)		
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing Any and all lawful business	or c	ountry to be ca			
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing  Any and all lawful business  (Purpose(s) of corporation authorized in home state	or c	ountry to be ca			
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing  Any and all lawful business  (Purpose(s) of corporation authorized in home state  Name and street address of Florida registered agent:	or c	ountry to be ca			
10748 Sky Prairie Street Fishers, IN 46038  (Current mailing)  Any and all lawful business (Purpose(s) of corporation authorized in home state)  Name and street address of Florida registered agent:  Name: Manzo & Associates, P.A.	or c	ountry to be ca			

#### 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.



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:	
	- 第3 <b>2</b>
Vice Chairman:	7.0
Address:	4 YES
	CC
Director: R. Todd Garey	
Address: 10748 Sky Prairie Street Fishers, IN 46038	
Director: Collin Frost	
Address: 10748 Sky Prairie Street Fishers, IN 46038	
B. OFFICERS	
President:	
Address:	~ <u></u>
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, 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. R. Todd Garey  (Typed or printed name and capacity of person signing application)	

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

## • STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

DIN OCT 20 PN 2 SECKETARY OF STA TALLAHASSFE, FLOI

To Whom These Presents Come, Greetings:

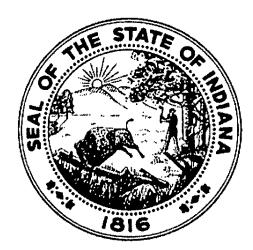
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State-of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### **CHEESEHEAD INCORPORATED**

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July 03, 2001, and was in existence or authorized to transact business in the State of Indiana on August 13, 2010.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Thirteenth Day of August, 2010.

TODD ROKITA, Secretary of State

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