00005251

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	·	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000187270080

11/29/10--01020--009 **808.00

11/09/10--01010--018 **70.00

W1-52967

12/2/10



November 12, 2010

TIM MCELROY 12924 PERCE STREET PACOIMA, CA 91331

SUBJECT: NATURAL BALANCE PET FOODS, INC.

Ref. Number: W10000052967

We have received your document for NATURAL BALANCE PET FOODS, INC. and your check(s) totaling \$70.00. 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 \$800.00.

Please return the corrected original and one copy of 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) 245-6931.

Becky McKnight
Regulatory Specialist II Supervisor
New Filing Section

Letter Number: 210A00026578

COVER LETTER

TO: New Filing Division of	Section Corporations		
SUBJECT:	Natural Ba	lance Pet Fation - must include suffix)	oods Inc.
	(Name of corpor	ation - must include suffix)	,
Dear Sir or Madam:			
The enclosed "Appl "Certificate of Exist transact business in	cation by Foreign Corporation ence," and check are submitted Florida.	for Authorization to Transa to register the above referen	ct Business in Florida," need foreign corporation to
Please return all cor	respondence concerning this ma	atter to the following:	
	I'm MCEloui		
	rim MCEloy (Nam		
No	Awal Balance P	Oct Foods In	<i>C.</i>
	(Firm	/Company)	
(2924 Prese	Street	
Q_{α}	coima, CA	91331	
	/ (City/St	ate and Zip code)	
For further informat	ion concerning this matter, plea	se call:	
Tim M	crson) at (81	8,897-258	_
(Name of P	erson) (A	rea Code & Daytime Teleph	ione Number)
New Filing Division of Clifton Buil	Corporations ding tive Center Circle	MAILING A New Filing S Division of C P.O. Box 632 Tallahassee, I	ection forporations 7
Enclosed is a check	for the following amount:		
S70.00 Filing Fe	e \$\prec\$\tag{3.75}\$ 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

REGISTER A FOR		RANSACT BUSI	INESS IN THE STATE OF FLORID DUC. COMPANY," "CORPORATION,")ત.
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")			
Dick Var	r Patter's Natural	· Balance	Pet Foods, Inc. ned for the purpose of transacting busin	
2. Calife	ornia	3	95-4234261 (FEI number, if applicable)	
(State or country	under the law of which it is incom	rporated)	(FEI number, if applicable))
4. July ?	20,1989	5	perpetual uration: Year corp. will cease to exist o	
(Date	of incorporation)	(D	uration: Year corp. will cease to exist o	or "perpetual")
6.	(Date first transac	1,2008		
	(Date first transac	ted business in Flo	orida, if prior to registration) F.S., to determine penalty liability)	
1000				
71_1_4_2	4 Pierce St., (Princi	nal office address	LM 4(33)	
		Same		
		ー u m と nt mailing address)	A second section of the section of the second section of the section of the second section of the sectio	
		-	•	
8.	Wholesale Pe	+ Food		
(Purpose(s) of corporation authorized in ho	me state or countr	y to be carried out in state of Florida)	3
9. Name and stree	et address of Florida registered	i agent: (P.O. B	ox NOT acceptable)	
	Corporation Sex	Wica Com	Mnu	SECRETAR High for 29
Name:			_	`.≺
Office Address:	1201 Hayes Stre	<u>et</u>		PH APP
	Tayahassee (City)		Florida 32301	STATE SEATIS
	(City)		(Zip code)	₽ ₩

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)

Dona L Criebe Assistant VP

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

A. DIRECTORS
Chairman: Joey Herrick
Address: 12924 Pierce St
Pacoina, (17 9133)
Vice Chairman: Lynda Herrich
Address: 12924 Pierce St
Pacoina, (A 9133)
Director: 6rey hay
Address: 12924 Pierce sh.
Director: 6 reg hay Address: 12924 Pierce sh Pacoina, UP 91371
Director:
Address:
B. OFFICERS
President: Joey Herrich
Address: 12924 Pre-1e 5t
Pacoina, (A 9137)
Vice President:
Address:
•
Secretary: Lynnda Herrich
Address: 12924 Prece St., Pacoing (A 9133)
Treasurer: Lunbola Herroti
Address: 12924 Prence St; Pacoina, (A 9133)
Additss
NOTE: K necessary, you man attach an addendum to the application listing additional officers and/or directors.
13. Joen Servik
(Signature of Director or Officer listed in number 12 of the application)
14. Joey Herrick, President & CEO (Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS

10 NOV 29 PM 3: 11

ENTITY NAME:

NATURAL BALANCE PET FOODS, INC.

FILE NUMBER:

C1465456

FORMATION DATE:

07/20/1989

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 28, 2010.

DEBRA BOWEN Secretary of State