# F12000000094

(Re	equestor's Name)				
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PICK-UP	☐ WAIT	. MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only

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### **COVER LETTER**

TO: New Filing S Division of C					
SUBJECT:	Lyons Magn	tion - must include suffix			
<u></u>	Name of corpora	tion - must include suffix	-0		_
Dear Sir or Madam:					
"Certificate of Existe	cation by Foreign Corporation ence," or "Certificate of Good seign corporation to transact but	Standing" and check are subm			
Please return all corr	espondence concerning this ma	atter to the following:			
	Cheelyn LEE				_
	C'heelyn LEE Name	e of Person	.,,		_
	LYONS MAGNUS E			_	_
		· · · · · · · ·		_	_
į	3158 E. HAMILT	ON AUE			
	A	ddress			_
	FRESNO, CA 9:	3 <i>702</i>			_
	City/Sta	te and Zip code			_
	CALER @/YONSMI	agnus , 00 m sed for future annual report no			_
	E-mail address: (to be us	sed for future annual report no	tification)		
For further informati	on concerning this matter, plea	se call:			
Cheelyn Name of Per	rson at (55	rea Code & Daytime Telephor	ne Number	12 FEB	CHSIAIC NO3S
New Filing S Division of C Clifton Build 2661 Execut Tallahassee,	Corporations ling live Center Circle FL 32301	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations	BI4 AMII: 14	ETARY OF STATE
Enclosed is a check f	or the following amount:				
\$70.00 Filing Fo	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filin Certificate of Certified Co	of Status	s &



#### FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

## 12 FEB 14 AMII: 14

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 3, 2012

CHERILYN LEE 3158 E. HAMILTON AVENUE FRESNO, CA 93702

SUBJECT: LYONS MAGNUS EAST, INC.

Ref. Number: W12000000295

We have received your document for LYONS MAGNUS EAST, INC. and your check(s) totaling \$78.75. 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 \$1,700.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 812A00000064

www.sunbiz.org

#### 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. Lyons Magnus East, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "lnc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) KENTUCKY

(State or country under the law of which it is incorporated)

(FEI number, if applicable) | 12/19/83 | 5. | PERPETUAL |
| (Date of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") Nov. 13, 2003
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 3158 E. Harnilton Ave, Fresno, CA 93702

(Principal office address)

Same as above

(Current mailing address) Wholesale Food Peoducts
(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) Lydia Butts

4725 LAKELAND Commerce Packway

Suite 11

LAKELAND, FL., Florida 33805

(Zip code) Office Address:

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.

(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.

Names and business addresses of officers and/or directors: SECRE		FILED JARY OF STATE	
A. DIRECTORS	DIVISION OF D	ORPORATIONS	
Chairman: Robert Smittemp	12 FEB 14	AM []: [4	
Address: 3158 E. Hamilton Ave			
FRESNO, CA 93702			
Vice Chairman: Brent Smitteamp			
Address: 3158 E. Hamilton Ave			
FRESNO, CA 93702			
Director: KENT Waleack			
Address: 3158 E. HAMILHON AVE			
FRESNO, CA 93702			
Director:			
Address:			
B. OFFICERS			
President: Robert Smitt Comp			
Address: 3158 E. HAMILTON AVE			
FRESNO, CA 93702		, . <del></del>	
Vice President: Beant Smitterup			
Address: 3158 E. HAMILTON AVE			
FRESNO, CA 93702			
Secretary: KENT Waleack			
Address: 3158 E. HAMILTON AVE			
Treasurer: FRESNO, CA 93702			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additi	onal officers and/or di	rectors.	
13. 1/18 lib 6			
Signature of Director or Officer	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 1	
The officer or director signing this document (and who is listed in number 12 above are true and that he or she is aware that false information submitted in a document third degree felony as provided for in s.817.155, F.S.	e) affirms that the fact to the Department of S	s stated herein tate constitutes a	
14. Robert Smittamp  (Typed or printed name and capacity of person signing app			
(Typed or printed name and capacity of person signing app	plication)		

# Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

#### **Certificate of Existence**

Authentication number: 122430

Visit <a href="https://app.sos.ky.gov/ftshow/certvalidate.aspx">https://app.sos.ky.gov/ftshow/certvalidate.aspx</a> to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

#### LYONS MAGNUS EAST, INC.

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is December 19, 1983 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 6<sup>th</sup> day of February, 2012, in the 220<sup>th</sup> year of the Commonwealth.

12 FEB IL AMII: IL

Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

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