

**F13000004559**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

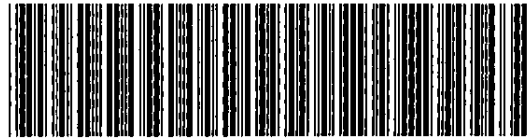
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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09/30/13--01014--001 \*\*70.00

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13 OCT 11 AM 8:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
10/23/13

1013-541171

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Full Bottle Group Inc  
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," or "Certificate of Good Standing" 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:

Steve Risi

Name of Person

Full Bottle Group Inc

Firm/Company

9200 S. Dadeland Blvd #705

Address

Miami, FL 33156

City/State and Zip code

Steve Risi@plc-00p.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Risi

Name of Person

at ( 305 ) 670-9660

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2013

STEVE RISI  
FULL BOTTLE GROUP INC  
9200 S. DADELAND BLVD #705  
MIAMI, FL 33156

SUBJECT: FULL BOTTLE GROUP INC.  
Ref. Number: W13000054474

RECEIVED  
13 OCT 11 AM 10:05  
TELETYPE UNIT  
COMMUNICATIONS SECTION

We have received your document for FULL BOTTLE GROUP 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):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap  
Regulatory Specialist II

Letter Number: 813A00023019

**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. Full Bottle Group Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

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

2. Delaware 3. 46-3170042  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8-20-13 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 9-25-13  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. ~~Delaware~~ 9200 S. Dadeland Blvd #705  
(Principal office address)  
same Miami, FL 33156  
(Current mailing address)

8. any lawful act or activity  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

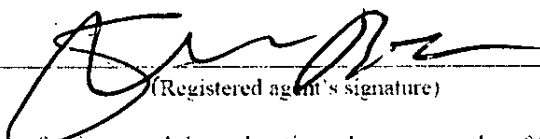
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Steve Risi

Office Address: 9200 S. Dadeland Blvd #705  
Miami FL Florida 33156  
(City) (Zip code)

**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.

FILED  
13 OCT 11 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Reed Berglund

Address: 9200 S. Dadeland Blvd #705  
Miami FL 33156

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13 OCT 11 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

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

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

Director: Natalie Enright

Address: 9200 S. Dadeland Blvd #705

B. OFFICERS

President: Reed Berglund

Address: 9200 S. Dadeland Blvd #705  
Miami FL 33156

Vice President: Natalie Enright

Address: 9200 S. Dadeland Blvd #705  
Miami FL 33156

Secretary: Natalie Enright

Address: 9200 S. Dadeland Blvd #705 Miami FL 33156

Treasurer: Reed Berglund

Address: 9200 S. Dadeland Blvd #705 Miami FL 33156

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

13. Reed Berglund

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Reed Berglund, President

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

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FULL BOTTLE GROUP INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF AUGUST, A.D. 2013.

FILED  
13 OCT 11 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5386352 8300

131013032

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0681984

DATE: 08-21-13