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PICK-UP	☐ WAIT	MAIL		
(B	dusiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to	o Filing Officer:			

Office Use Only



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THE ELLIP 13 NOV 14 PM 4: 01 SECRETARY OF STATE

10/22 b W13-58653

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Taylor Farms F	Florida, In	C.	
		- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certifica above referenced foreign corporation to	te of Good Stan	ding" and check are subr	
Please return all correspondence concer	ning this matter	to the following:	
Theresa Wright			
	Name of	Person	
Taylor Farms Florida, II	1C.		
	Firm/Com	pany	
7492 Chancellor Drive			
Orlando, Florida 32809	Addre	ess	
	City/State a	nd Zip code	
twright@taylorfarms.com			
E-mail addre	ss: (to be used f	for future annual report n	otification)
For further information concerning this	matter, please o	call:	
Theresa Wright	407	, 235-1853	
Name of Person			one Number
STREET/COURIER ADDRE New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	rporations
Enclosed is a check for the following ar	mount:		
□ \$70.00 Filing Fee □ \$78.75 Fili Certificate		\$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 22, 2013

THERESA WRIGHT 7492 CHANCELLOR DR ORLANDO, FL 32809

SUBJECT: TAYLOR FARMS FLORIDA, INC.

Ref. Number: W13000058653

RECEIVED

13 NOV 13 AM 10: 16

SECRETARY OF STATE

We have received your document for TAYLOR FARMS FLORIDA, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 213A00024649

www.sunbiz.org

Division of Comparations D.O. DOV 6297 Tollahoggas Florida 2221

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.

(11 name unavailable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)
DE	3. 931155159
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
	5. PERPETUAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
April 30, 1998	
(Date first transacted busine	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)
7492 chancellor Drive, Orlando, F	L 32809
(Principal office	address)
7492 Chancellor Drive, Orlando, Fl	_ 32809
(Current mailing	address)
Fresh Food Processing	
(Purpose(s) of corporation authorized in home state of	or country to be carried out in state of Florida)
Name and street address of Florida registered agent:	(P.O. Box NOT acceptable)
	THE RESTRICTION OF THE RESTRICTI
Name: Michael T. Phillips ffice Address: 7492 Chancellor D ORLANDO (City)	Sa E
ffice Address: 7492 Chancellor D	FINE Florida 32809 FINE FINE FINE FINE FINE FINE FINE FINE
1001 1100	Florida 32809
(City)	(Zip code)
Registered agent's acceptance:	service of process for the above stated corporation at the plac
aviny deen namea as revisierea ayeni ana io accedi s	in the place of process you are above stated to perfect at the place
signated in this application, I hereby accept the appo	ointment as registered agent and agree to act in this capacity. tes relative to the proper and complete performance of my
	service of process for the above statea corporation at the pi

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: Address: Vice Chairman: Director: Mr. Bruce Taylor Address: 911-B Blanco Circle, Salinas, CA 93902 Director: Mr. Thomas Romans Address: 911-B Blanco Circle, Salinas, CA 93902 **B. OFFICERS** President: Mr. Bruce Taylor Address: 911-B Blanco Circle, Salinas, CA 93902 Vice President: Mr. Alec Leach Address: 911-B Blanco Circle, Salinas, CA 93902 Secretary: Treasurer: Mr. Thomas Bryan Address: 911-B Blanco Circle, Salinas, CA 93902 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Michael T. Phillips, President

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

12. Names and business addresses of officers and/or directors: A. DIRECTORS				
irector: Mr. Stan Pura				
Address: 911-B Blanco Circle, Salinas, CA 93902				
irector: Mr. Mark Wetterau				
Address: 911-B Blanco Circle, Salinas, CA 93902				
Director: Mr Mike Waitukaitis				
Address: 911-B Blanco Circle, Salinas, CA 93902				
Director:				
Address:				
B. OFFICERS President: Mr. Michael T. Phillips Address: 7492 Chancellor Drive, Orlando, FL 32809	TALL. ₹			
Vice President:	AND THE STATE OF T			
Address:	E PR			
Secretary:	OI IIDA			
Address:				
Treasurer:				
Address:				
NOTE: If necessary, you may attach an addendum to the application listing addi	tional officers and/or directors.			
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 abo				

a third degree felony as provided for in s.817.155, F.S.

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TAYLOR FARMS FLORIDA, 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 SIXTH DAY OF NOVEMBER,

A.D. 2013.

SECRETARY OF STATE

2639375 8300

131276850

والمعالي ولاياس

AUTHENTICATION: 0873810

DATE: 11-06-13

You may verify this certificate online at corp.delaware.gov/authver.shtml