

FI4000001605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

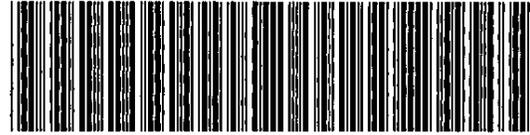
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 APR 10 PM 3:29

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YMD 4/14

Brownlie  Evans Wolf & Lee
ATTORNEYS AT LAW

tonnie@brownlieevans.com

VIA FIRST CLASS MAIL

March 26, 2014

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: APPLICATION FOR AUTHORIZATION
TO TRANSCAT BUSINESS IN FLORIDA**

To Whom It May Concern,

Please find enclosed an original complete Application for Authorization to Transcat Business in Florida, a copy of the Certificate of Existence/Authorization of Flora, Inc, as well as documentation of the merger of Flora, Inc., a Vermont corporation, and Flora, Inc., a Washington corporation. I have also included a Registered Agent's Consent and a copy of the Resolution of the Board of Directors of Flora, Inc., adopting the name Flora (WA), Inc. for use in Florida. Please also find our check in the amount of \$755.00, representing the \$70.00 filing fee, \$35.00 filing fee for the Resolution of the Board of Directors, \$150.00 Annual Report fee for 2013, and the \$500.00 penalty for late filing. Should you have any questions or concerns regarding this application, please do not hesitate to contact our office.

Sincerely,

BROWNLIE EVANS WOLF & LEE, LLP


Tonnie Pontow
Paralegal

/tep
Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FLORA, 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:

Tonnie Pontow
Name of Person
Brownlie Evans Wolf & Lee, LLP
Firm/Company
230 E. Champion Street
Address
Bellingham, WA 98225
City/State and Zip code
tonnie@brownlieevans.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tonnie Pontow at (360) 676-0306
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 & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

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TALLAHASSEE, FLORIDA
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1. FLORA, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

FLORA(WA) INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington 3. 91-1747264
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 25, 2013 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. March 25, 2013
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 805 E. Badger Road Lynden, WA 98264
(Principal office address)

(Current mailing address)

8. To manufacture and distribute non-prescription health and nutrition products.
(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: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

See Attached
(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.

FLORIDA

NRAI Services, Inc.. hereby consents to the appointment as registered agent of **Flora, Inc.** in the State of Florida.

NRAI Services, Inc.



Lori D. Stuhlman, Assistant Secretary

NRAI Services, Inc.
1200 South Pine Island Road
Plantation, FL 33324

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Otto Greither

Address: Bahnhofstr. 24, Bruckmuhl, Germany 83052, Germany

Vice Chairman: _____

Address: _____

Director: Otto Greither

Address: Bahnhofstr. 24, Bruckmuhl, Germany 83052, Germany

Director: Georg Widhammer

Address: Bahnhofstr. 24, Bruckmuhl, Germany 83052, Germany

B. OFFICERS

President: Otto Greither

Address: Bahnhofstr. 24, Bruckmuhl, Germany 83052, Germany

Vice President: _____

Address: _____

Secretary: Otto Greither

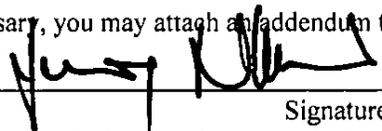
Address: Bahnhofstr. 24, Bruckmuhl, Germany 83052, Germany

Treasurer: Georg Widhammer

Address: Bahnhofstr. 24, Bruckmuhl, Germany 83052, Germany

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

13. _____



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. Georg Widhammer, Director

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

**CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
FLORA, INC.**

FILED
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SECRETARY OF STATE
WILLIAM ASSEF, FLORIDA

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 12/16/1994.

I FURTHER CERTIFY that as of the date of this certificate, FLORA, INC. remains active and has complied with the filing requirements of this office.

Date: February 6, 2014

UBI: 601-592-376



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State