

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : INCORPORATING SERVICES FL  
Account Number : I20050000052  
Phone : (850) 656-7956  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** finance@fullbottlegroup.com

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Full Bottle Group Inc.**

Certificate of Status	0
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MD 7/30

**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.")

(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. 08/20/2013

5. perpetual

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

6. 09/25/2013

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

7. 541 Jefferson Ave, Suite 100, Redwood City, CA 94063

(Principal office address)

9200 South Dadeland Blvd Suite 705 Miami, FL 33156

(Current mailing address)

8. Any lawful business 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: NRAI Services, Inc.

Office Address: 1203 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.*

NRAI Services, Inc.

By: Deborah Brouse - ASST Secretary

(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.

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

**A. DIRECTORS**Chairman: Reed BerglundAddress: 9200 South Dadeland Blvd Suite 705Miami, FL 33156

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

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

Director: Natalie EnrightAddress: 9200 South Dadeland Blvd Suite 705Miami, FL 33156

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

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

**B. OFFICERS**President: Reed BerglundAddress: 9200 South Dadeland Blvd Suite 705Miami, FL 33156Vice President: Natalie EnrightAddress: 9200 South Dadeland Blvd Suite 705Miami, FL 33156Secretary: Natalie EnrightAddress: 9200 South Dadeland Blvd Suite 705, Miami, FL 33156Treasurer: Steve RialAddress: 9200 South Dadeland Blvd Suite 705, Miami, FL 33156

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.817.153, F.S.

14. Natalie Enright, COO

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

# Delaware

*The First State*

PAGE

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DELAWARE  
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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 THIRTIETH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FULL BOTTLE GROUP INC." WAS INCORPORATED ON THE TWENTIETH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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140900221

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: 1497358

DATE: 06-30-14