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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

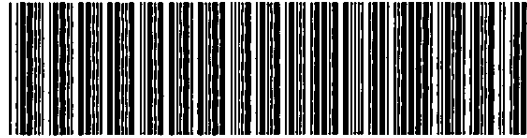
(Document Number)

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14 NOV 17 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/21/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Pro Core Sports Nutrition 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:

Michael ROSSMAN
Name of Person
Pro Core Sports Nutrition
Firm/Company
1136 SOrenu Drive
Address
Fort Pierce FL 34949
City/State and Zip code
ROSSMAN@PROCORESPORTSNUTRITION.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael ROSSMAN at (954) 709-7665
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2014

MICHAEL ROSSMAN
1136 S OCEAN DRIVE
FORT PIERCE, FL 34949

SUBJECT: PRO CORE SPORTS NUTRITION, INC
Ref. Number: W14000065137

RECEIVED
NOV 17 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PRO CORE SPORTS NUTRITION, 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):

Please accept our apology for failing to mention this in our previous letter.

The entity's date of incorporation/organization must be listed in the document.

Please return the corrected original and one copy of 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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 714A00023885

FILED
14 NOV 17 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2014

MICHAEL ROSSMAN
1136 S OCEAN DRIVE
FORT PIERCE, FL 34949

SUBJECT: PRO CORE SPORTS NUTRITION, INC
Ref. Number: W14000065137

We have received your document for PRO CORE SPORTS NUTRITION, INC and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 514A00022943

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Pro Core Sports Nutrition, 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. Utah 3. 45-4586295
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/7/14 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1/5/2015
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 801 Kings Highway Fort Pierce FL 34945
(Principal office address)
PO Box 425 Layton UT 84040
(Current mailing address)

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


Name: Michael Roseman

Office Address: 1136 S Ocean Dr
Fort Pierce, Florida 34949
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9. 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)

10. 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.

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

A. DIRECTORS

Chairman: Pat Nbar

Address: PO Box 425
Layton UT 84040

Vice Chairman: Jeff Weaver

Address: PO Box 425
Layton UT 84040

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael Rossman

Address: 1136 S Ocean Dr
Ft Pierce FL 34949

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. _____
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.

13. Michael Rossman, President
(Typed or printed name and capacity of person signing application)



Utah Department of Commerce
Division of Corporations & Commercial Code
160 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, UT 84114-6705
Service Center: (801) 530-4849
Toll Free: (877) 526-3994 Utah Residents
Fax: (801) 530-6438
Web Site: <http://www.commerce.utah.gov>

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/30/2014
8240739-014210302014-207843

CERTIFICATE OF EXISTENCE

Registration Number:	8240739-0142
Business Name:	PRO CORE SPORTS NUTRITION, INC.
Registered Date:	February 17, 2012
Entity Type:	Corporation - Domestic - Profit
Current Status:	Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Kathy Berg

Kathy Berg
Director
Division of Corporations and Commercial Code