

F17000001897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

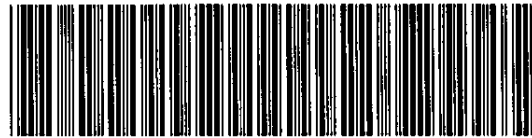
(Business Entity Name)

(Document Number)

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

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04/25/17--01010--030 \*\*78.75

RECEIVED  
2017 APR 24 PM 12:10  
TALLAHASSEE, FLORIDA

FILED  
2017 APR 25 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
APR 27 2017

April 13, 2017

Registration Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**RE: Mama Gone Granola, Inc.**

To Whom It May Concern:

Enclosed with this letter please find the following:

1. Two copies of Application by Foreign Corporation to Transact Business in Florida for the referenced Corp;
2. A check for \$78.75 for the Filing Fee.
3. A return envelope.

Please file the Amendment to the Articles of Organization and return a copy to me in the enclosed envelope. If you have any questions regarding this filing please call me at 800-706-4741.

Sincerely yours,

James Morris

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mama Gone Granola, 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:

James Morris

Name of Person

Anderson Registered Agents

Firm/Company

3225 McLeod Drive, Suite 100

Address

Las Vegas, Nevada 89121

City/State and Zip code

ra@andersonadvisors.com

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

For further information concerning this matter, please call:

James Morris

800

706-4741

at ( )

Name of Person

Area Code

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

Registration 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.*

Mama Gone Granola, Inc.

1. \_\_\_\_\_  
(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)

West Virginia

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

July 11, 2016

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

117 State Rt 34 #6137, Hurricane, WV 25526

7. \_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Anderson Registered Agents, Inc.

Office Address: 1000 North Washington Blvd.

Sarasota \_\_\_\_\_, Florida 34236  
(City) (Zip code)

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.

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2017 APR 25 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Sara Hedrick

Address: 117 State Rt 34 #6137  
Hurricane, West Virginia 25526

Vice Chairman: Stephen Hedrick

Address: 117 State Rt 34 #6137  
Hurricane, West Virginia 25526

Director: Sara Hedrick

Address: 117 State Rt 34 #6137  
Hurricane, West Virginia 25526

Director: Stephen Hedrick

Address: 117 State Rt 34 #6137  
Hurricane, West Virginia 25526

**B. OFFICERS**

President: Sara Hedrick

Address: 117 State Rt 34 #6137  
Hurricane, West Virginia 25526

Vice President: Stephen Hedrick

Address: 117 State Rt 34 #6137  
Hurricane, West Virginia 25526

Secretary: Sara Hedrick

Address: 117 State Rt 34 #6137, Hurricane, West Virginia 25526

Treasurer: Stephen Hedrick

Address: 117 State Rt 34 #6137, Hurricane, West Virginia 25526

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

12. Sara Hedrick

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. Sara Hedrick

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

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2017 APR 25 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# State of West Virginia



## Certificate

*I, Mac Warner, Secretary of State of the State of  
West Virginia, hereby certify that*

**MAMA GONE GRANOLA, INC.**

was incorporated under the laws of West Virginia and a Certificate of Incorporation was issued by the West Virginia Secretary of State's Office on July 11, 2016.

I further certify that the corporation has not been revoked by the State of West Virginia nor has the West Virginia Secretary of State issued a Certificate of Dissolution to the corporation.

Accordingly, I hereby issue this

## CERTIFICATE OF EXISTENCE

Validation ID:1WV1N\_CNBN7



*Given under my hand and the  
Great Seal of the State of  
West Virginia on this day of  
April 05, 2017*

*Mac Warner*

*Secretary of State*