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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## FOREIGN PROFIT/NONPROFIT CORPORATION

Brewers Supply Group, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
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Help

JUL 3 1 2019

https://efile.sunbbz.org/scripts/efilcovr.exe

## 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.

(If name unavail	able in Florida enter alternate cornorate na	 me a	depted for the purpose of transacting business in Flo	rida)
(State or countr	y under the law of which it is incorporated)	. <b>.</b>	70.0516874 (FEI number, if applicable)	
12/23/2003				
(Date	of incorporation)	Э.	(Date of duration, if other than perpetual)	<del></del>
•	·			
701 3rd Ave We			Florida, if prior to registration) 02, F.S., to determine penalty liability)	
701 3rd Ave We	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379	7.15		7 (J 7 (J 12 41
701 3rd Ave We	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379 (Pri	7.150 neipi	02, F.S., to determine penalty liability)	7 (g. 3) 5 (2) 5 (3)
	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379 (Pri	7.15) neipi	02, F.S., to determine penalty liability) al office address) g address, if different)	<u>بر</u>
Name and stree	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379  (Pri  (Current m	7.15) neipi	02, F.S., to determine penalty liability) al office address) g address, if different)	<u>بر</u>
Name and <u>stree</u> Name:	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379  (Pri  (Current m et address of Florida registered agent:	7.15) neipi	02, F.S., to determine penalty liability) al office address) g address, if different)	<u>بر</u>
Name and street Name:	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379  (Pri  (Current met address of Florida registered agent: 6 T Corporation System  1200 South Pine Island Road	7.15) neipi	o2, F.S., to determine penalty liability)  al office address)  g address, if different)  b. Box. NOT acceptable)	J
Name and stree	(SEE SECTIONS 607.1501 & 60 st, Shakopee, MN 55379  (Pri  (Current met address of Florida registered agent: 1 C T Corporation System  1200 South Pine Island Road	7.150 neipa ailin	02, F.S., to determine penalty liability) al office address) g address, if different)	<u>بر</u>

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.

C.T. Corporation System

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.

IRE	CTORS		
	William Rahr		
:88: _	701 3rd Ave West, Shakopee, MN 55379		
– Chain	man:		_
 tor:	Jeffrey Taylor		
	701 3rd Ave West, Shakopee, MN 55379		
-	lan Ward		
	701 3rd Ave West, Shakopee, MN 55379		
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	dent:		
	Jeffrey Taylor		
tary:	701 3rd Ave West, Shakopee, MN 55379		-
css: _	Jeffrey Taylor		
css:	701 3rd Ave West, Shakopee, MN 55379		
_	If necessary, you may attach an addendum to the application listing additi	onal officers and/or directors.	
	Signature of Director or Officer		

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

13. 

Teffey Taylor Officer CFC

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

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## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BREWERS SUPPLY 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 JULY, A.D. 2019.

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.

3742499 8300

SR# 20196227709

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

Jaffrey W. Bulletin, Secretary of State

Authentication: 203312819

Date: 07-30-19