F960000004372

| TO: Qualification/Tax Lien Section Division of Corporations | 4 4 744 70 470 470 470 470 470 470 470 4 |
|--|---|
| · | 1 COCO 1 334351 -08/28/9601053010 ++++270.00 *+++270.00 |
| SUBJECT: Tom Lange Lo INC (Name of corporation - must include suffix) | · · · · · · · · · · · · · · · · · · · |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for Authorization to Tra Florida", "Certificate of Existence", and check are submitted to register the foreign corporation to transact business in Florida. | nsact Business in above referenced |
| Pleaso return all correspondence concerning this matter to the following: | |
| Macily N Johnson (Name of Person) | W96-16875 |
| Tom Lange lo INC | |
| 5231 S 64 St. Rd (Address) | P 95 27 |
| S | SECRETARY OF CO. 95 AUG 27 |
| | EO OF STATE XX 9: 00 |
| Should you need to call someone concerning this matter, please call: | - 85 |
| (Name of Person) at (2/7) (Area Code & Days | 186-3300 |
| (Alea Couc & Day) | uuc reieviiviie (Nuimper) |

COURIER ADDRESS:

Qualification/Tax Lien Sec. **Division of Corporations** 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

(Area Code & Daytime Telephone Number)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 13, 1996

MARILYN JOHNSON TOM LANGE CO INC 5231 S 6TH ST. RD. SPRINGFIELD, IL 62707

SUBJECT: TOM LANGE COMPANY, INC.

Ref. Number: W96000016875

We have received your document for TOM LANGE COMPANY, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Pursuant to section 607.1502(4) or 617.1502(4), F.S., this office is required to collect a penalty of \$1000 for each year this corporation transacted business in Florida prior to qualification and the appropriate annual report fees that would have been due had the corporation qualified the year it began operation in this state.

However, the \$1000 per year penalty fee is waived, pursuant to laws of Florida 96-212, for any corporation that applies for a certificate of authority between July 1, 1996 and December 1, 1996.

The total amount due this office through December 31, 1996 to cover the back annual report(s) is \$200.00.

The total amount due for both the current filing and the annual report fee is \$270.00. Please return this letter with your check in the amount of \$270.00 and your resolution to adopt a name for use in Florida.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers Document Examiner

Letter Number: 496A00038430

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

| I, the undersigned | Michael | ٤ | Smith (Name) | · · · · · · · · · · · · · · · · · · · | , do hereby ce | rtify |
|----------------------------------|------------------------------|----------------|--------------------------------|---------------------------------------|--------------------------------------|----------|
| that this Resolution of | | | of WC orporate Name) | | <u> </u> | |
| a corporation duly org | | | | | | |
| Be it resolved, that | Tom | Lan | g & Lo (Corporate Nat | Tuc me) | | <u> </u> |
| organized and existing Ton Lang | in the State of e Conpany | ot. | Missouri <i>Hlinob,</i> Inc | , herel | oy adopts the cha for use in Figr | |
| Dated: 8-26-94 | | | ŕ | | AK 9: 00 | |
| | Signature of eith | vi er Chair | The See 22 | any officer | | |
| _ | Michael | £. | Smith | | | |

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:

| | Tone Lange Company! | |
|-----------|--|---|
| Ι., | (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION words or abbreviations of like import in language as will clearly indicate that it is a corporation instead natural person or partnership if not so contained in the name at present.) | l" or of a |
| 2 | Missouri (State or country under the law of which it is incorporated) 3. 43-0961130 (FEI number, if applicable) | |
| 4, | (Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to eximperpetual") | SECRE SE SECRE SECRE SECRE SECRE SECRE SECRE SECRE SECRE SECRE SECRE SEC |
| 6 | (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION words or abbreviations of like import in language as will clearly indicate that it is a corporation instead natural person or partnership if not so contained in the name at present.) Missouri 3. 43-0961130 | 10F COSFOR |
| /· - | Springfield II 62707 (Current mailing address) | 9: 00 |
| 8 | Distribution of FRESH FRUITS + Vegetables (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) | |
| 9. N a | Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable) | <u>NOT</u> |
| | Name: <u>CI Corpora</u> | |
| | Office Address: 1200 S Pine Island Road | |
| | Plantation, Florida, 3332 (Zip Code) | 4 |
| 10. | Registered agent's acceptance: (Zip Code) | |
| regis | ing been named as registered agent and to accept service of process for the absoration at the place designated in this application, I hereby accept the appoins stered agent and agree to act in this capacity. I further agree to comply with the protatutes relative to the proper and complete performance of my duties, and I am famaccept the obligations of my position as registered agent. | ntment as evisions of uiliar with |
| | Lettee - | IncloseD |
| | (Registered agent's signature) | |
| 11 / | Attached to a contitionto of aviatames duly multi-unit-unit | |

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.

ACCEPTANCE OF APPOINTMENT

RE: TOM LANGE COMPANY, INC.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: August 2, 1996

C T/CORPORATION SYSTEM

Ву_

Jonathan L. Miles, Assistant Secretary

| | FRERELL C GAY | |
|-------------------------|---|------------------------|
| Address: | 1516 W. Lake SHORE | |
| _ | Springlistd II 62707 | |
| | mun: | |
| | | |
| _ | · · · · · · · · · · · · · · · · · · · | |
| Director: _ | | |
| Address: _ | | |
| | | - |
| Director: _ | | briv B6 Legistato |
| | | |
| _ | | 27 ₁ |
| B. OFFIC | ERS (Street address only- P. O. Box NOT acceptable) | = |
| President: | F.W Gumpert | |
| Address: _ | 444 Trilbey Ct. | |
| <u></u> | Noblesville In 46060 | |
| Vice Presid | ent: | <u> </u> |
| Address: _ | | <u> </u> |
| | | _ |
| | Michael & Smith | |
| Address: | 2130 S. GlENWOOD | |
| | Springfield II 62704 | |
| Treasurer: | Michael & Smith | _ |
| | 21.20 S. G/ENWOOD | _ |
| Address: _ | - // · | |
| Address: _ | Speingfield I/ 62704 | _ |
| NOTE: If r | necessary, you may attach an addendum to the application listing additional | _ |
| NOTE: If r officers and | necessary, you may attach an addendum to the application listing additional | - |

STATE OF MISSOURI

Rebecca McDowell Cook Secretary of State

WISSOUR

CORPORATION DIVISION

8

CERTIFICATE OF CORPORATE GOOD STANDING

AUG 27

I, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICES AND IN MY CARE AND CUSTODY REVEAL THAT

TOM LANGE COMPANY, INC.

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 4TH DAY OF JANUARY, 1971, AND IS IN GOOD STANDING, HAVING FULLY COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE.

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 5TH DAY OF AUGUST, 1996.



