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Requestor's Name 660 East Jefferson St	1000027297215 -01/05/9901001019 ******8.75 ******8.75			
Address Tallahassee, FL 3230	01		************************************	※※※※※※※(つ
City State Zip	Phone	10	0002729 0-01/05/99-0	7216
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( ) Call When Ready ( ) Walk In ( ) Mail Out	( ) Call if P ( ) Will Wai	roblem it	() After 4:30 (x) Pick Up	
Name Availability Document	1/4/98	PLEASE	RETURN EXTRA CO FILE STAMPED THANKS	DPY(S)
Examiner Updater	·		JOEY	/
Verifier				11/2/09
Acknowledgment	INTERIOR OF CORPO	, <del></del>	1/5/98	
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W.P. Verifier	gant Mars L			-
CR2E031 (1-89)				

## TRANSMITTAL LETTER

	cation/Tax Lien Section n of Corporations				
SUBJECT:	INTERAMERICAN JUIC	E COMPANY, INC.			
SUBJECT		e of corporation - must include suffix)			
Dear Sir or Mac	dam: .				
The enclosed "A "Certificate of I transact busines	Existence", and check are subm	ation for Authorization to Transact Business nitted to register the above referenced foreign	in Florida", a corporation to		
Please return al	l correspondence concerning th	nis matter to the following:			
	EMILIO DI	IORIO			
		(Name of Person)			
	INTERAMERI	CAN JUICE COMPANY, INC.	_		
	(Firm/Company) · Pro				
	154 MARSH	ST.			
	(Address)		ectories		
	PORT NEWAR	rk, nj 07114			
	·	(City/State/Zip)			
Should you nee	ed to call someone concerning	this matter, please call:	PM 5: 25		
•		•			
Emilio D	i Iorio at	( 973 ) 589-4044			
(Nam	e of Person)	(Area Code & Daytime Telephone Num	iber)		
COURIER A	DDRESS:	MAILING ADDRESS:			
	Tax Lien Section	Qualification/Tax Lien Section			
Division of Corporations		Division of Corporations P.O. Box 6327	Division of Corporations P.O. Box 6327		
409 E. Gaines St.					

Tallahassee, FL 32399

Tallahassee, FL 32314

## 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.	INTERAMERICAN JUICE COMPANY, INC
1.	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2	DELAWARE 3. 13-32000089
۷.	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	Jan. 27, 1984 5. Perpetual
	(Date of Incorporation)  (Duration: Year corp. will cease to exist or "perpetual")
6.	Aug. 6, 1996
٠.	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	INTERAMERICAN JUICE COMPANY
	154 Marsh St., Port Newark, NJ 07114
	(Current mailing address)
8.	Employ Florida labor to load & unload juice ships.
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT) acceptable)
	Name: C T Corporation System
	Office Address: 1200 South Pine Island Road Company
	Office Address: 1200 South Pine Is land Road 50 cm
	Plantation , Florida , 33324 Orri on
10	(Zip Code)  . Registered agent's acceptance:
co re al	aving been named as registered agent and to accept service of process for the above stated or properation at the place designated in this application, I hereby accept the appointment as egistered agent and agree to act in this capacity. I further agree to comply with the provisions of I statutes relative to the proper and complete performance of my duties, and I am familiar with ad accept the obligations of my position as registered agent.
	CONNIE BRYAN SPECIAL ASSISTANT SECRETARY (Registered agends signature)
	(Registered agents signature)
11	1. 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.

 Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Address: \_\_\_\_\_ Vice Chairman: Address: \_\_\_\_\_ Director: \_\_\_\_\_V. Pavesic \_\_\_ Address: 1, Route de Chailly 1814 La Tour de Peilz, Switzerland Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) General Manager: Maarten Heymeyer Address: 154 Marsh St. Port Newark, NJ 07114 Vice President: Address: \_\_\_\_\_\_ Secretary: Alan waxman Address: \_\_\_\_SQUIRE, SANDERS & DEMPSEY 350 Park Avenue New york, NY 10022 Treasurer: Emilio Di Iorio Address: 154 Marsh St. Port Newark, NJ 07114 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

## Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERAMERICAN JUICE COMPANY, 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 TWENTY-NINTH DAY OF DECEMBER, A.D. 1998.

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.

MI-4 PH 5:25

Edward J. Freel, Secretary of State

AUTHENTICATION:

9492679

DATE:

12-29-98

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