

F990000003175

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name
660 East Jefferson Street

Address
Tallahassee, FL 32301 (850)222-1092
City State Zip Phone

CORPORATION(S) NAME

300002911353--4
-06/22/99--01001--003
*****70.00 *****70.00

Fresh Samantha, Inc

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DIVISION OF CORPORATIONS
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| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Liability Partnership | | <input type="checkbox"/> Fictitious Name |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

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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. Fresh Samantha, Inc.
(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. Maine
(State or country under the law of which it is incorporated)

3. 010389347
(FEI number, if applicable)

4. May 23, 1983 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. 84 Industrial Park Road, Saco, Maine 04072

(Current mailing address)

8. The purchase, sale, manufacture, processing and promotion of beverages and other consumables.
(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:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

Sally Annenta Gray
(Registered agent's signature) (Officer)
SPECIAL ASSISTANT SECRETARY

(Type Name and Title of Officer)

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TALLAHASSEE, FLORIDA

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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached list of directors

Address: _____

Vice Chairman: See attached list of directors

Address: _____

Director: See attached list of directors

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached list of officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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Treasurer: _____

Address: _____

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

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael Carter, President

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

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VII. Officer and/or Director Information
Fresh Samantha, Inc.

Name: Doug Levin
Chief Executive Officer
Director

Business Address: 84 Industrial Park Road
Saco, Maine 04072

Residence Address: 2 Gordon's Lane
Cape Elizabeth, Maine 04107

Social Security No. 127-38-1477

Name: Mike Carter
President
Director

Business Address: 84 Industrial Park Road
Saco, Maine 04072

Residence Address: R. 3, 32A Cousins Road
Gorham, Maine 04038

Social Security No. 338-48-8686

Name: Robert Carter
Treasurer
Director

Business Address: 84 Industrial Park Road
Saco, Maine 04072

Residence Address: 22 Eagle's Nest Drive
Scarborough, Maine 04074

Social Security No. 377-28-3038

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Name: Andrew Balson
Director

Business Address: 2 Copley Place
Boston, Massachusetts 02116

Name: Mark Nunnelly
Director

Business Address: 2 Copley Place
Boston, Massachusetts 02116

Name: Mark K. Googins, Clerk/Secretary

Business Address: c/o Verrill & Dana
One Portland Square
Portland, ME 04112

Residence Address: 26 Wildwood Blvd.
Cumberland Foreside, ME 04110

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State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the records of organization, amendment, and dissolution of corporations and annual reports filed by the same.

I further certify that FRESH SAMANTHA, INC., formerly DOWN EAST SUNSPROUTS, INC. is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is May 23, 1983.

I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.



In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed, given under my hand at Augusta, Maine, this twenty-seventh day of May 1999.

DAN GWADOSKY

Secretary of State

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3. 010389347
(FEI number, if applicable)

4. May 23, 1983
(Date of incorporation)

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(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

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(Current mailing address)

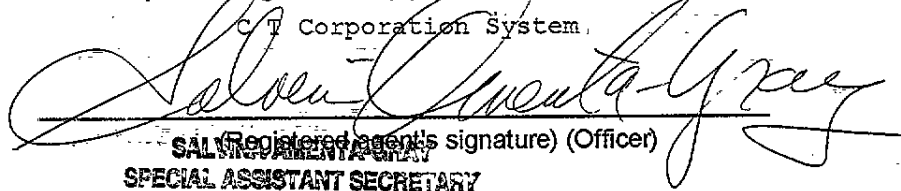
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(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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Name: C T Corporation System
Office Address: c/o C T Corporation System, 1200 South Pine Island Road
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(Zip Code)

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C T Corporation System

SALVADOR AMENTA GRAY
SPECIAL ASSISTANT SECRETARY

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TALLAHASSEE, FLORIDA

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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached list of directors

Address: _____

Vice Chairman: See attached list of directors

Address: _____

Director: See attached list of directors

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached list of officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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Treasurer: _____

Address: _____

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

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael Carter, President

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

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Chief Executive Officer
Director

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Residence Address: 2 Gordon's Lane
Cape Elizabeth, Maine 04107

Social Security No. 127-38-1477

Name: Mike Carter
President
Director

Business Address: 84 Industrial Park Road
Saco, Maine 04072

Residence Address: R. 3, 32A Cousins Road
Gorham, Maine 04038

Social Security No. 338-48-8686

Name: Robert Carter
Treasurer
Director

Business Address: 84 Industrial Park Road
Saco, Maine 04072

Residence Address: 22 Eagle's Nest Drive
Scarborough, Maine 04074

Social Security No. 377-28-3038

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Name: Andrew Balson
Director

Business Address: 2 Copley Place
Boston, Massachusetts 02116

Name: Mark Nunnally
Director

Business Address: 2 Copley Place
Boston, Massachusetts 02116

Name: Mark K. Googins, Clerk/Secretary

Business Address: c/o Verrill & Dana
One Portland Square
Portland, ME 04112

Residence Address: 26 Wildwood Blvd.
Cumberland Foreside, ME 04110

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State of Maine



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I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the records of organization, amendment, and dissolution of corporations and annual reports filed by the same.

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DAN GWADOSKY

Secretary of State