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CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN STATE OF FLORIDA:

	*./
 SAVONHBC.COM, INC. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPOR abbreviations of like import in language as will clearly indicate that it is a corporation instead or partnership if not so contained in the name at present.) 	ATION", or words or
2. Illinois 3. 65-0948 (State or country under the law of which it is incorporated) (FEI number of the law of which it is incorporated)	3074 mber, if applicable)
(State or country under the law of which it is incorporated) (Fig. 1941)	inder, if approacte)
4. August 18, 1999 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to expect to e	xist or "perpetual")
6. <u>Upon Oualification</u> (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F	F .S.))
7. 161 N. Clark - Ste. 2600, Chicago, Illinois 60601	
(Current mailing address)	
8. To sell Health and Beauty Care and/or Grocery Items to retailers of public (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	r the general
Name and street address of Florida registered agent:	
Name: C T Corporation System	.
Office Address: Island Road System, 1200 South Pine	·
<u>Plantation</u> , Florida, <u>33324</u> (Zip Code)	
10. Registered agent acceptance: Having been named as registered agent and to accept service of process for the above stated designated in this application. I hereby accept the appointment as registered agent and agree further agree to comply with the provisions of all statutes relative to the proper and complete p and I am familiar with and accept the obligation of my position as registered agent.	to act in this capacity. I
C T Corporation System	· · · · · · · · · · · · · · · · · · ·
$\int_{0}^{\infty} C(x) dx$	• •

(Registered agent's signature) (Officer)
Anne E. Diamond
Assistant Secretary
(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

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 of the having custody of corporate records in the jurisdiction under the law of which it is incomporated. 12. Names and addresses of officers and/or directors: **DIRECTORS** A. Chairman: Salvatore Ricciardi Address: 5400 Broken Sound Blvd., NW 100 Boca Raton, Florida 33487 Vice Chairman: Address:_____ Director: <u>Jeffrey Levitetz</u> Address: 5400 Broken Sound Blvd., NW 100 Boca Raton, Florida 33487 Director: Address: _____ **OFFICERS** В. President: Salvatore Ricciardi Address: 5400 Broken Sound Blvd., NW 100 Boca Raton, Florida 33487 Vice President: Address: Secretary: Lyle S. Genin Address: 161 N. Clark St., Ste. 2600

Chicago, Illinois 60601

Treasurer:	
Address:	
OTE: If necessary, you may attach an addendum to the application listing additional of addressors.	ficers 经
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(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	- 000 - 000
oplication) 1 Lvle S. Genin, Secretary	
(Typod or printed name and canacity of person signing application)	- J.



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this ______ 24TH ____ day of _____ SEPTEMBER A.D. _____ 1999 .

Desse White

SECRETARY OF STATE