

M01 0000000 269



MJH

January 2, 2001

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Wrong form

00789-00524-00471

Enclosed please find the following documents:

1. Transmittal Letter
2. Application to do Business in Florida  
Check for \$125.00 for Filing Fee & Registered User

W01-771

600003525666--2  
-01/05/01--01086--012  
\*\*\*\*125.00 \*\*\*\*125.00

We would appreciate your prompt attention to this request.

Sincerely,

Santiago G. Piqué  
Chief Operating Officer & CFO

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 FEB - 1 AM 11:13

Swiss Herbal Institute, LLC

444 Brickell Avenue, Suite 51-506 Miami FL 33131 • Tel: (800) 661-0551 • Fax: (800) 835-4965



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

January 26, 2001

SANTIAGO G. PIQUE  
SWISS HERBAL INSTITUTE, LLC  
444 BRICKELL AVENUE, SUITE 51-506  
MIAMI, FL 33131

SUBJECT: SWISS HERBAL INSTITUTE, LLC  
Ref. Number: W01000000771

We have received your document for SWISS HERBAL INSTITUTE, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 401A00004513

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. SWISS HERBAL INSTITUTE, LLC.

(Name of foreign limited liability company)

2. Delaware

(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. 65-1062632

(FEI number, if applicable)

4. December 19, 2000

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will  
cease to exist or "perpetual")

6. "Upon Qualification"

(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 444 Brickell Avenue, Suite 51-506

Miami, Florida 33131

(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

President & CEO — David F. Greenberg, 18420 SW 77<sup>th</sup> Court, Miami, FL 33157

COO & CFO — 181 Crandon Boulevard # 302, Key Biscayne, FL 33149

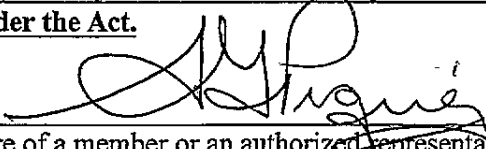
Exec. VP — Rosario Moreno, 5005 Collins Avenue, # 1024, Miami Beach, FL 33140

Exec. VP — Mara Rankin, 2355 North Meridian Avenue, Miami Beach, FL 33140

Exec. VP — Sheryl Stopka-Altamirano, 640 Brickell Key Drive # 1007. Miami, FL 33173

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: The purpose of the Company is to engage in any lawful act or activity for which a limited liability company may be organized under the Act.

  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document  
constitutes an affirmation under the penalties of perjury that the facts stated herein  
are true.)

Santiago G. Piqué

Typed or printed name of signee

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 FEB - 1 AM 11:13

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

**1. The name of the Limited Liability Company is:**

SWISS HERBAL INSTITUTE, LLC.

**2. The name and the Florida street address of the registered agent and office are:**

CORPORATION SERVICE COMPANY

(Name)

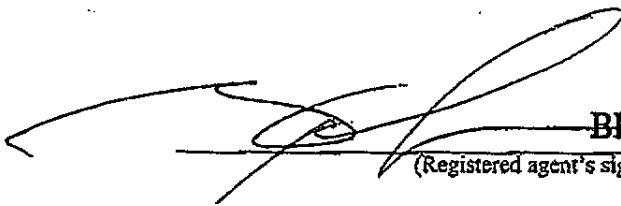
1201 Hays street

Florida street address (P.O. Box NOT ACCEPTABLE)

Tallahassee, FL 32301-2636

City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*



**BRIAN COURTNEY, ASST. V.P.**

(Registered agent's signature)

**\$ 100.00 Filing Fee for Application  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (optional)  
\$ 5.00 Certificate of Status (optional)**

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*State of Delaware*  
*Office of the Secretary of State*

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SWISS HERBAL INSTITUTE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 0935570

010040279

DATE: 01-25-01