MOLOCOLO 121 Sublime Celebration Foods, LLC

1200 North Federal Highway Suite 307 Boca Raton, FL 33432 Phone: (561) 368-3601 Fax: (561) 368-4143

July 26, 2001

720

MJH

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

400004507844---7 -07/30/01--01125--009 ****160.00 ****160.00

Enclosed is an Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida and a Certificate of Designation of Registered Agent/Registered Office for Veganese, LLC. An original certificate of existence is also enclosed.

In addition to the letter of acknowledgement we are requesting one (1) Certified copy and one (1) Certificate of Status for Veganese, LLC.

Enclosed is a check made payable to the Florida Department of State for these services, totaling \$160.00 per the instructions.

Please send to the following address:

Alexander Group Attn: Jill Lang

1200 N Federal Highway, Suite 307

Boca Raton, FL 33432

We understand that the process takes 7-10 business days. Please use our Fed Ex account #0331-4845-3 to send the requested forms.

If you have any questions, please contact our office.

Thank you.

Jill Lang

OI JUL 30 PM 4: 40
SECRETARY OF STATE
TALLAHASSEF F STATE

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 REGIS	TER A FOI	REIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. Name of foreign limited liability company)		· Tariff Salaman agra
		·
2. Urisdiction under the law of which foreign limited liability (FEI number, if applicable)		
company is digamized)	·	14.
4. This zooi (Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	engera e a e a	To sales and the sales are
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to	
6 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	<u>— година пр</u>	- 14-5 to 10
7 IZOO N. FEDERAL HIGHWAY , SUITE 307		
RP		*
BOCA RATON, FL 33432 (Street address of principal office)		
(Street address of principal office)		
8. If limited liability company is a manager-managed company, check here 💢		_
O The name and named business at the Color		
9. The name and usual business addresses of the managing members or managers are as follows:	SE ALI	⊇
NANCI B. ALEXANDER	AR S	
	SE C	ω π
1200 N. FEDERAL HIGHWAY		- m
Suite 307	- SS- :	
BOLA RATON, FL 33432	DE TO	 5
	<u> </u>	. ari <u>.1</u> ."
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cust	ody of recor	rds in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under eath of the translator must be submitted.)	language, a	-
additional discontinuous designation of the dansation must be submitted.)		
1. Nature of business or purposes to be conducted or promoted in Florida:		
	<u> </u>	<u> </u>
Mari Alexandr		
Signature of a member or an authorized representative of a member.		Arga
(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.)		
Typed or printed name of signee		, gir so a securi
Typed of printed name of signee		

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 th		•	
1. The name of d	e Limited Liability Comp	oany is:	
	VEGANESE	3 has been been been been been been been bee	<u> </u>
2. The name and	the Florida street address	of the registered agent and office are:	
	Nacci R	A	
-	1VANC: /3.	(Name)) . '* (** **
	·		
_	/200 N. FEDER	Iress (P.O. Box NOT ACCEPTABLE)	
	Florida street add	dress (P.O. Box <u>NOT</u> ACCEPTABLE)	
	73.79.6	7545	
	· JOLA KATON (C	FL 33432 City/State/Zip)	
	•	•	
Having been name	d as registered agent and t	to accept service of process for the above stated lin	niteď
liability company a	t the place designated in t	this certificate, I hereby accept the appointment as	
registered agent ar statutes relating to	ld agree to act in this capa the proper and complete r	acity. I further agree to comply with the provisions performance of my duties, and I am familiar with ar	of all
accept the obligation	ons of my position as regis	stered agent as provided for in Chapter 608, F.S.	<i>ia</i>
\sim	44 0		
Maria	Alrand	. w	
•	(Signature)		
	0.400.00		
	\$ 100.00 \$ 25.00	3 11	
	\$ 30.00		•
	\$ 5.00	Certificate of Status (optional)	

State of Delaware

Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VEGANESE, 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-THIRD DAY OF JULY, A.D. 2001.

Warriet Smith Windson Harriet Smith Windson, Secretary of State

3412577 8300

010356085

AUTHENTICATION: 1258177

DATE: 07-23-01