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## LEWIS, RICE & FINGERSH, L.C.

ATTORNEYS AT LAW

500 N. BROADWAY, SUITE 2000 ST. LOUIS, MISSOURI 63102-2147 WWW.LRF.COM KWINSCHEL@LEWISRICE.COM

TEL (314) 444-7835 FAX (314) 612-7835

All Was Consolation

January 23, 2004

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: New Era Produce, L.L.C.

Dear Sir or Madam:

KATHLEEN DALY WINSCHEL

PARALEGAL

Enclosed please find an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida and a Certificate of Designation of Registered Agent/Registered Office, both in duplicate, for the above referenced LLC. In addition, I have enclosed a Certificate of Good Standing issued by the Missouri Secretary of State. Finally, I have enclosed our check for \$160.00, representing the required filing fees for the Application (\$100.00), Designation of Registered Agent (\$25.00), a certified copy (\$30.00) and a certificate of status (\$5.00).

Please proceed to file the enclosed, and return the duplicates with evidence of your receipt and filing to the undersigned in the enclosed, self-addressed, stamped envelope. If you have any questions, please feel free to contact me.

Very truly yours,

Kathleen Daly Winschel

Jaly with P

kdw Enclosures

## 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:

| NEW ERA PRODUCE, L.L.C.  |                              |  |             | (O)  |
|--|------------------------------|--|-------------|--|
| (Name of foreig  | gn lim                       | ited liability company)                                    | 7/20        | The  |
| MISSOURI   | 2                            | 74-3072661   |             | THE STATE OF THE S |
| MISSOURI (Jurisdiction under the law of which foreign limited liability  | . <i>э.</i><br>У             | (FEI number, if applicable                                 | e) 37       | <u> 74                                   </u>  |
| company is organized)  | •                            | , , , , , ,  |             | 83   |
| SEPTEMBER 9, 2002  | 5                            | PERPETUAL  |             | 5,75   |
| (Date of Organization)   | ٥.                           | (Duration: Year limited liability compa                    | iny will ce | asc to   |
| ,  |                              | exist or "perpetual")                                      | Ť           | 7  |
| UPON QUALIFICATION   |                              |  |             |  |
| (Date first transacted business in Florida. (S   | See se                       | ections 608.501, 608.502, and 817.155, F                   | .S.)        |  |
|  |                              | •  |             |  |
| 23190 SHADY OAK LANE   |                              |  |             |  |
| EGMEDO ELORIDA 22020   |                              |  |             |  |
| ESTERO, FLORIDA 33928 (Street addre  | ess of                       | principal office)  |             |  |
| (53,560, 844.0   |                              | E  |             |  |
| If limited liability company is a manager-manage   | ed co                        | ompany, check here 🗶                                       |             |  |
| ,  |                              | <del>-</del>   |             |  |
| The name and usual business addresses of the ma  | ıanag                        | ring members or managers are as f                          | ollows:     |  |
|  | _                            |  |             |  |
| GREGORY HOLZHAUSEN, 23190 SHADY OAL  | K L                          | ANE, ESTERO, FL 33928                                      |             |  |
|  |                              |  |             |  |
| JOHN K. PRUELLAGE, 500 N. BROADWAY,  | , st                         | JITE 2000, ST. LOUIS, MO                                   | 53102       |  |
|  |                              |  |             |  |
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|  |                              |  |             |  |
| the jurisdiction under the law of which it is organized. (A pl   | hotoc                        | opy is not acceptable. If the certificate is in            |             |  |
|  | hotoc                        | opy is not acceptable. If the certificate is in            |             |  |
| the jurisdiction under the law of which it is organized. (A pl<br>translation of the certificate under oath of the translator must   | photoc<br>st be st           | opy is not acceptable. If the certificate is in ubmitted.) | a foreign l |  |
| the jurisdiction under the law of which it is organized. (A pl<br>translation of the certificate under oath of the translator must   | photoc<br>st be st           | opy is not acceptable. If the certificate is in ubmitted.) | a foreign l |  |
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| the jurisdiction under the law of which it is organized. (A pl<br>translation of the certificate under oath of the translator must   | photoc<br>st be st           | opy is not acceptable. If the certificate is in ubmitted.) | a foreign l |  |
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| the jurisdiction under the law of which it is organized. (A pl translation of the certificate under eath of the translator must.)  Nature of business or purposes to be conducted.  Holden | ohotoc<br>st be st<br>d or p | opy is not acceptable. If the certificate is in ubmitted.) | a foreign l |  |

GREGORY HOLZHAUSEN, MEMBER AND MANAGER

Typed or 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.

| NEW ERA PRODUC                            | E, L.L.C.               | · · · · · · · · · · · · · · · · · · · |                          | PEG E   |
|---|-------------------------|---------------------------------------|--------------------------|---|
| 2. The name and th                        | e Florida street addres | s of the registere                    | d agent and office are:  | TS CORPORATION OF THE PARTY OF |
|   | TOP S                   |                                       |                          |   |
|   |                         |                                       |                          |   |
|   |                         |                                       |                          |   |
| <del></del>                               |                         |                                       |                          |   |
|   | ESTERO                  | FL                                    | 33928                    |   |
| (City/State/Zip)                          |                         |                                       |                          |   |
| Having been named<br>liability company at |                         |                                       | ce of process for the ab |   |

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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF MISSOURI

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Matt Blunt Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

> NEW ERA PRODUCE, L.L.C. LC0070292

was created under the laws of this State on the 9th day of September, 2002, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand an imprinted the GREAT SEAL of the State of Missouri, on this, the 26th day of January, 2004

Secretary of State

rtification Number: 6367946-1 Page 1 of 1 Reference: