

M04000002552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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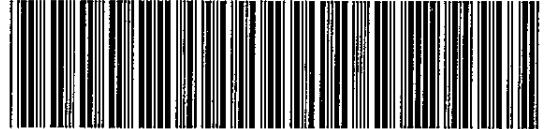
(Business Entity Name)

(Document Number)

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CORPORATIONS  
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 781647 7115774  
AUTHORIZATION : *Patricia Riquelme*  
COST LIMIT : \$ 125.00

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TALLAHASSEE, FLORIDA

ORDER DATE : June 28, 2004

ORDER TIME : 11:58 AM

ORDER NO. : 781647-005

CUSTOMER NO: 7115774

CUSTOMER: Ronald A. Marini, Esq  
Marini & Associates  
3580 One Biscayne Tower  
Two South Biscayne Blvd.  
Miami, FL 33131

FOREIGN FILINGS

NAME: POWER DRINKS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER: \_\_\_\_\_

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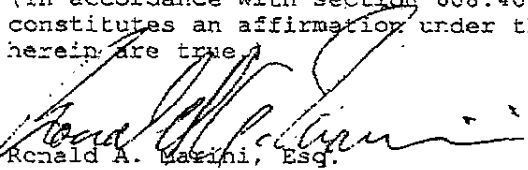
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION  
TO TRANSACT BUSINESS IN FLORIDA

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. Power Drinks, LLC  
(Name of Foreign Limited Liability Company)
2. Delaware  
(Jurisdiction under the law of which foreign  
limited liability company is organized)
3. 76-0760838  
(FEI number, if applicable)
4. April 14, 2004  
(Date of Organization)
5. Perpetual  
(Duration: Year limited  
liability company will cease to  
exist or "perpetual")
6.  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 3508 NW 114TH AV  
MIAMI, FL 33178  
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here XXX
9. The name and usual business addresses of the managing members or managers are  
as follows:  
Faustino Martinez  
Manager  
3508 NW 114TH AV  
MIAMI, FL 33178
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:

Wholesale Products

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.)

  
Ronald A. Marini, Esq.  
Power of Attorney  
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.

1. The name of the Limited Liability Company is:

**Power Drinks, LLC**

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

MARINI & ASSOCIATES, P.A.  
ONE BISCAYNE TOWER  
TWO S. BISCAYNE BOULEVARD  
SUITE 3580  
MIAMI, FLORIDA 33131

*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, Florida Statutes.*

MARINI & ASSOCIATES, P.A.

By

  
Ronald A. Marini, Esq.

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

# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POWER DRINKS, 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-EIGHTH DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POWER DRINKS, LLC" WAS FORMED ON THE FOURTEENTH DAY OF APRIL, A.D. 2004.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



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

3790425 8300

AUTHENTICATION: 3201009

040476237

DATE: 06-28-04