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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

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SUBJECT: ______BIG'UMM...S PRODUCTS, L.L.C. (Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

<u> Charla Br</u> (Na	anchame of Person)	
	DUCTS, L.L.C.	
5901 Leed.	s Lane	
	(Address)	
Davie, Florida	33331	
	tate and Zip Code)	
For further information concerning this matter, ple	ease call:	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee En ^c E ^{\$} 130.00 Filing Fee & Certificate of		y

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	BIG'UMMS PRODUCTS, L.L.C. (Name of Foreign Limited Liability Company)	
	Louissiana 3. 51-0484327 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4.	9/26/03 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	Upon Qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	5901 Leeds Lane	
	Davie, Florida 33331 (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:	
	Charla Branch	
	5901 Leeds Lane	
	Davie, Florida 33331	
10). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records	sin
	ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a 33	
tra	ejunstiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate under oath of the translator must be submitted.)	

(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.)

> Charla Branch 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:

BIG'UMM...S PRODUCTS, L.L.C.

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

<u>Charla</u> Bran Name) Leeds Lane 5901 Florida Street Address (P.O. Box NOT ACCEPTABLE) <u>FL</u> Davie 33331

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, Florida Statutes.

(Signature)

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

