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### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Anchor Ice, LLC		
(Name of Limit	ted Liability Company)	
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited	
Please return all correspondence concerning this ma	atter to the following:	
Randall Mast		
(Nan	ne of Person)	
Anchor Ice, LLC		
(Firm	n/Company)	
1111 Bellewood Road		
	(Address)	
Anchorage, Ky 40223		
(City/Sta	te and Zip Code)	
For further information concerning this matter, plea	se call:	
Randall Mast	_at (_502) 472-6114	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Boxed{1}\$125.00 Filing Fee \text{Fee & Certificate of S}\$	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy	

## 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:

Anchor Ice, LLC				
	(Name of Foreign Lim	ited Li	ability Company)	
Commonwealth of K			20-4182708	
Jurisdiction under the le company is organized)	aw of which foreign limited liabi	lity	(FEI number, if applicable)	
01/18/2006		5.	perpetual	
	Organization)		(Duration: Year limited liability company will c exist or "perpetual")	ease to
n/a				
	(Date first transacted business (See sections 608.501 & 608.502			
1111 Bellewood I	Road, Anchorage, KY 402	223		
		•		
<del></del>	(Street Ad	dress o	of Principal Office)	
				)6 *
If limited liability of	company is a manager-mana	aged (	company, check here	06 MAY
The name and usua	al business addresses of the	mana	ging members or managers are as follows:	8
Randall Mast, 111	1 Bellewood Road, Anchora	ıge, K	Y 40223	
Daniel Heach 44	803 Forest Oaks Or Louis	مااند	KY 40245	<u> </u>
Daniel Hosch, 14	bus Forest Oaks Dr., Louis	ville,	K1 40245	$\frac{\omega}{\omega}$
Daniel Hosch, 14  Attached is an original of jurisdiction under the large	803 Forest Oaks Dr., Louis	in 90 da	KY 40245  ays old, duly authenticated by the official having custor is not acceptable. If the certificate is in a foreign lang	O: 39
. Nature of busines	s or purposes to be conduct	ed or	promoted in Florida: Production and sale	
of bagged ice to	consumers	. 4		
	Vandel			<del></del>
	Signature of a member or a (In accordance with section 608.408	B(3), F.S	horized representative of a member. S., the execution of this document constitutes ry that the facts stated herein are true.)	
	Randall Mast			
	Typed or pr	inted	name of signee	

502 245 7632

P. 002

May 07 06 04:55p

Randall Mast & Anchor Ice 502-245-7632

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## 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:		<u> </u>
Anchor Ice, LLC	0 5 	Alsic 23s
2. The name and the Florida street address of the registered agent and office are:	TAY 18	SO AD NO
NRAI Services Inc.	AM IO:	RY OF STATE CORPORATIONS
(Name)	မ သ	ATION ATION
2731 Executive Park Drive Florida Street Address (P.O. Box NOT ACCEPTABLE)	Suite	ťΛ
Florida Street Address (P.O. Box NOT ACCEPTABLE)	1	
Weston FL 33331		
City/state/2tp		

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)
Lisa Reeves, Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

And the state of t



## Trey Grayson Secretary of State

### **Certificate of Existence**

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

#### ANCHOR ICE, LLC

is a limited liability company duly organized and existing under KRS Chapter 275, whose date of organization is January 18, 2006.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 275.190 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 11th day of May, 2006.



Trey Grayson

Secretary of State
Commonwealth of Kentucky
vbennett/0629961 - Certificate ID: 30920