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#### **COVER LETTER**

**TO:** Registration Section

Division of Corporations	
SUBJECT: The USA LIC (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 m	atter to the following:
Christia (Nai	ne Anderson me of Person)
Labort Breweries of	m/Company) $\overline{\triangleright}_{\overline{\leftarrow}}$ (Extractions
2070 wens Buay W.	SEE 6 F. C. (Address) SEE 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Tonendo ONT	ARIO M5TIAT Conoda ate and Zip Code)
For further information concerning this matter, plea	ase call:
Christine Anderson (Name of Person)	at (416) 361-5233 (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed to check for the following amount:  125.00 Filing Fee & Certificate of	\$155.00 Filing Fee & \$\Bigs\bigs\bigs\bigs\bigs\bigs\bigs\bigs\b

### 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: Liability Company; must include "Limited Liability Company," "L. L. C.," or "LLC") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") (Jurisdiction under the law of which foreign limited liabilit company is organized) December (Date of Organization) (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F S to determine penalty liability) 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: ee Ottacha 10 Attached is an original certificate of existence, no more than 90 days old, duly authernicated 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 eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized representative of a member national B.V.

(In accordance with section 608.408(3), F.S., the execution of this document constitute in an affirmation under the penalties of perjury that the facts stated herein are true)

A.M. A.M. C.W.

Typed or printed name of signee

#### InBev USA LLC

#### **Managers**

#### **Keith Gregory Hunt**

**Primary Address:** 

207 Queen's Quay West

Suite 299

Toronto, Ontario M5J 1A7 (Canada)

#### Miguel Nuno da Mata Patricio

Primary Address:

207 Queen's Quay West

Toronto, Ontario M5J 1A7 (Canada)

#### Susan M. Rabkin

Primary Address:

303 Richmond Street

London, Ontario N6B 2H8 (Canada)

#### Henry Glen Walter IV

Primary Address:

Key Center

North Tower, Suite 900 50 Fountain Plaza

Buffalo, New York 14202

07 AUG 16 PM 2: 16
SECRETARY OF STATE

## 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:		
INBEV USA LIC d/h/q Labott USA.		•
2. The name and the Florida street address of the registered agent and office are:	07 AUG SECRET TALLAHA	
C T Corporation System		O COLUMN
(Name)	AAY ASSEE	i Lame
1200 South Pine Island Road		
Florida Street Address (P.O. Box NOT ACCEPTABLE)	2: 16 STATE ORIDA	
·	A 40	
Plantation, Florida 33324		
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.

By: (North Corporation System
(Signature)

CHARLES W. MEYER
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)

# Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INBEV USA L.L.C." 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 NINTH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

07 AUG 16 PM 2: 16
SECRETARY OF STATE



2457346 8300 070793634 Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5825366

DATE: 07-09-07