

MO7000007081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

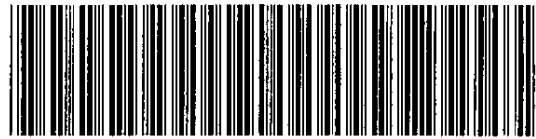
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000112452220

11/26/07--01007--023 **1205.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 DEC -6 AM 9:25

T. Hampton DEC - 6 2007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Doctors Nutrition, LLC
(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:

Mitchell F. Green, Esq.

(Name of Person)

Kramer Green Zuckerman Greene & Buchsbaum, P.A.

(Firm/Company)

4000 Hollywood Blvd, Suite 485 South

(Address)

Hollywood, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

Mitchell F. Green

(Name of Person)

at (954) 966-2112

(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 is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



KRAMER GREEN
ZUCKERMAN GREENE
& BUCHSBAUM, P.A.

4000 HOLLYWOOD BOULEVARD • SUITE 485 SOUTH • HOLLYWOOD, FL 33021

BWD. 954.966.2112 • MIAMI 305.374.4382 • BOCA 561.447.9422 • FAX 954.981.1605 • E-MAIL firm@KramerGreen.com • www.KramerGreen.com

ROBERT M. KRAMER
MITCHELL F. GREEN
LESLIE H. ZUCKERMAN
CRAIG M. GREENE
ROBERT I. BUCHSBAUM
ERIC J. STOCKEL

December 3, 2007

Tammy Hampton
Regulatory Specialist II
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Doctors Nutrition, LLC
Reference No. W07000057730

Dear Ms. Hampton:

Pursuant to your correspondence dated November 27, 2007, a copy of which is enclosed, regarding the above referenced entity, enclosed is a Certificate of Existence with Status in Good Standing for Doctors Nutrition, LLC, a Nevada limited liability company, issued by the Secretary of State for the State of Nevada on December 3, 2007.

Accordingly, please continue processing the enclosed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Doctors Nutrition, LLC. (which has also been revised, consistent with your instructions), as we are providing you with the Certificate of Good Standing well within the sixty (60) time period to do so.

Thank you very much. Please feel free to contact me should you require additional information.

Very truly yours,

KRAMER, GREEN, ZUCKERMAN,
GREENE & BUCHSBAUM, P.A.


Mitchell F. Green

MFG/drb
Enclosure(s)

K:\MFG\MOULAVI\DOCTORS NUTRITION\L-SOS - Registration.wpd



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 27, 2007

MITCHELL F GREEN, ESQ
KRAMER GREEN ZUCKERMAN GREENE & BUSHBAU
4000 HOLLYWOOD BLVD - STE 485 SOUTH
HOLLYWOOD, FL 33021

SUBJECT: DOCTORS NUTRITION, LLC
Ref. Number: W07000057730

RECEIVED
07 DEC -6 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for DOCTORS NUTRITION, LLC and your check(s) totaling \$1205.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 107A00067380

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **Doctors Nutrition, LLC**

(Name of Foreign Limited 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.")

2. **Nevada**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **20-4418257**

(FEI number, if applicable)

4. **February 16, 2006**

(Date of Organization)

5. **Perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

6. **February 17, 2006**

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. **11320 Fortune Circle, G-1**

Wellington, FL 33414

(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:

102 NE 2nd Street **SASSON MOULAVI-MGR.**

Boca Raton, FL 33432

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: **Bakery**

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.)

Sasson Moulavi

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 DEC -6 AM 9:25

**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:

Doctors Nutrition, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

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

Mitchell F. Green, Esq.

(Name)

4000 Hollywood Blvd, Suite 485 South

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Hollywood, FL 33021

FL

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)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 DEC -6 AM 9:25

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DOCTORS NUTRITION, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 16, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 3, 2007.

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State



Electronic Certificate
Certificate Number: C20071203-0033
You may verify this electronic certificate
online at <http://secretaryofstate.biz/>