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SECRETARY OF STATE
AND ANALYSES FIRM

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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: FRETKA PRODUCE INTERNATIONAL, LLC (Name of Limited Liability Company)				
(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:				
Name of Person)				
(Name of Person)				
FRESKA PRODUCE INFERNATIONAL, LLC (Firm/Company)				
140 BONAVENTURE BLUD APT. 112 (Address)				
WESTON, FL 33326 (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Person) at (305) 205-5680 (Name of Person) (Area Code & Daytime Telephone Number)				
MAILING ADDRESS: STREET ADDRESS:				
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314 Cinton Bunding 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: \$\Bigsim \frac{1}{2}\$125.00 \text{ Filing Fee} \text{ \$\Bigsim \frac{1}{2}\$130.00 \text{ Filing Fee & } \Bigsim \frac{1}{2}\$155.00 \text{ Filing Fee & } \Bigsim \frac{1}{2}\$160.00 \text{ Filing Fee, Certificate } \text{ Certified Copy of Status & Certified Copy}				

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

	IPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGI DIJABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1	Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
consent	unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability y," "L.L.C.," "LLC.")
2 \	TATE OF CALIFORNIA 3. 20-1459392 diction under the law of which foreign limited liability (FEI number, if applicable)
(Juri: comp	diction under the law of which foreign limited liability (FEI number, if applicable) any is organized)
4.	(Date of Organization) 5. PER PETUR L (Duration: Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6	May 15, 2007 (Date first transacted business in Florida, if prior to registration.)
	(See sections 608.501 & 608.502 F.S. to determine penalty hability)
7	311 MOUNTAIN VIEW HUE SEX
	OX NAR D, CA 93030 (Street Address of Principal Office)
8. If !	(Street Address of Principal Office)
	name and usual business addresses of the managing members or managers are as follows:
_	ARY CLEVENGER, SII MOUNTAIN VIEW AVE, DXNARD, CA 93030
4	ARY CLEVENGER, SII MOUNTAIN VIEW AND, OXNARD, CA 93030
the juris	ched is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in liction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a on of the certificate under oath of the translator must be submitted.)
	ature of business or purposes to be conducted or promoted in Florida:
_	FRESH PRODUCE.
	1991A
	Signature of a member or an authorized representative of a member. (In accordance with section 608.498(3), F.S., the execution of this document constitutes
	an affirmation under the penalties of perjury that the facts stated herein are true.)
	JAMES H BURNIFITE

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: FRESKA PRODUCE INTERNATIONAL, 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:	TS 8
VAMES H. BURNETTE (Name)	LLAHAS
140 BONAVENTURE BLUD, APT. 112 Florida Street Address (P.O. Box NOT ACCEPTABLE)	AHIO: 51 SEE FLORIDI
WES TON, FL 33326 City/State/Zip	DE -

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.

nature)

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

State of California Secretary of State

CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **5th day of August, 2004, FRESKA PRODUCE INTERNATIONAL, LLC**, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 11, 2007.



Jeha Boven

DEBRA BOWEN
Secretary of State