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D. BRUCE

JAN 22 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
_{SUBJECT:} Fallon Snowie, L	LC	
	(Name of Limited Liability Company)	
The enclosed "Application by Forei Florida," Certificate of Existence, as liability company to transact busine	ign Limited Liability Company for Authorization to Transact nd check are submitted to register the above referenced foreigns ass in Florida	Business in gn limited
Please return all correspondence con	ncerning this matter to the following:	
Mark Fallon		
	(Name of Person)	•
Fallon Snowie,	LLC	_
	(Firm/Company)	
3805 Edwards F	Road; Suite 700	08. SEC
	(Address)	AR A
Cincinnati, Ohio	45209	22 F SSEE.
	(City/State and Zip Code)	
For further information concerning	this matter, please call:	PH 12: L8
Mark Fallon	at (513) 241-5800	
(Name of Per	rson) (Area Code & Daytime Telephone Num	ber)
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 followin \$125.00 Filing Fee \$130	0.00 Filing Fee & \$\sum \\$155.00 Filing Fee & \$\sum \\$160.00 Filing Fee,	Certificate & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2007

MARK FALLON 3805 EDWARDS ROAD, SUITE 700 CINCINNATI, OH 45209

SUBJECT: FALLON SNOWIE, LLC

Ref. Number: W07000053873

08 JAN 22 PH 12: 1.8
SECRETARY OF STATE

Please accept our apology for failing to mention this in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 007A00066467



October 31, 2007

MARK FALLON 3805 EDWARDS ROAD, SUITE 700 CINCINNATI, OH 45209

SUBJECT: FALLON SNOWIE, LLC Ref. Number: W07000053873

We have received your document for FALLON SNOWIE, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 507A00063728



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: Fallon Snowie, 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.") Ohio (Jurisdiction under the law of which foreign limited liability company is organized) 4. October 23, 2007 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) 6. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 3805 Edwards Road; Suite 700 Cincinnati, Ohio 45209 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follow 3805 Edwards Road; Suite 700 Cincinnati, Ohio 45209 MMGRM 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: Retail Sale of Iced Drinks/Snow cones 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.)

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:			
Fallon Snowie, 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:	IALL	? 80	
Mark Fallon	AHA	JAN	77
(Name)	ARY	23	
Shoppes at Pembroke Gardens; 14536 SW Fifth Street	E OF S	PH	m
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ORE	7.5	D
Pembroke Pines 33027 _{FL}	> "	CO 2 ·	
City/State/7in			

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
\$ 25.00
\$ 25.00
\$ 30.00
\$ 5.00
Certified Copy (optional)
\$ Certificate of Status (optional)

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show FALLON SNOWIE, LLC, an Ohio Limited Liability Company, Registration Number 1735194, was organized within the State of Ohio on October 23, 2007, is currently in FULL FORCE AND EFFECT upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 7th day of January, A.D. 2008

Ohio Secretary of State

Validation Number: V20087J07EBF