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SECRETARY UF STATE
TAIL AHASSEE, FLORIDA

D. BRUCE

JUL 3 1 2008

**EXAMINER** 

#### **COVER LETTER**

	stration Section sion of Corporations	
SUBJECT:	Bio-Nutra Manufacturing	LLC
	(Name of	Limited Liability Company)
Florida," Cer		Liability Company for Authorization to Transact Business in re submitted to register the above referenced foreign limited da
Please return	all correspondence concerning the	is matter to the following:
	Calvin J Domenico Jr	
		(Name of Person)
	Calvin J Domenico Jr.,	PA TALLA
		(Firm/Company)
	P O Box 19828	
		(Address)
	Sarasota, Fl. 34276	
		y/State and Zip Code)
For further in	nformation concerning this matter	please call:
Calv	vin J Domenico Jr	at ( 941 ) 929 1390
	(Name of Person)	(Area Code & Daytime Telephone Number)
MAII	LING ADDRESS:	STREET ADDRESS:
		Division of Corporations
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Center Circle
I aliai	nassee, FL 32314	Tallahassee, FL 32301
	check for the following amount: 5.00 Filing Fee \$\square\$	e & \$\sumsymbol{\simsymbol{\sumsy

## 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:

I. Bio-Nutra Manufacturing LLC (Name of Foreign Limited Liability Company; must include	de "Limited Liability Company," "L	L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.").		
<sub>2.</sub> Nevada 3	02-4570680	
(Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if app	olicable)
4. March 13, 2006 <sub>5.</sub>	Pepetutal	
(Date of Organization)	(Duration: Year limited liability exist or "perpetual")	company will cease to
<sub>6.</sub> August 1,2008		
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.)	rida, if prior to registration.) to determine penalty liability)	108 860
<sub>7.</sub> 1435 East Venice Ave., Venice Fl. 342	292	
		30 ASS
(Street Address o	of Principal Office)	Me 2 TVI
8. If limited liability company is a manager-managed of	· • ·	3: 22 SIAIE LORID
<ol> <li>The name and usual business addresses of the mana Douglas Mann, 1435 East Venice Ave</li> </ol>		as follows:
	5., VOINGO, 11. 04202	
10. Attached is an original certificate of existence, no more than 90 da the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	is not acceptable. If the certificate is in	
11. Nature of business or purposes to be conducted or	promoted in Florida:	
Sale and manufacturing of fruit and fru	it by products	
Signature of a member or an auth (In accordance with section 608.408(3), F.S an affirmation under the penalties of perjur Douglas Mann	S., the execution of this document consti	

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 nam	e of the Limited Liability Co	ompany is:		
BIO-NUT	TRA MANUFACTUR	ING LLC		
If name una	vailable, the alternate name t	to be used in the state of Florida is:		
2. The nam	e and the Florida street addre	ess of the registered agent and office a	are:	
	CALVIN J. DOME	ENIOCO JR	08 . SE(	
		(Name)	08 JUL 30 SEBRETAR ALLAHASS	22000
	2512 REGATTA		mer i	1
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	PH 3	
	SARASOTA	FL	3: 22 STATE LORID	( barrer
		City/State/Zip		
liability com agent and ag relating to th	ppany at the place designated in gree to act in this capacity. If the proper and complete perfor of my position as registered ag (Signature)	nd to accept service of process for the a in this certificate, I hereby accept the a further agree to comply with the provisi rmance of my duties, and I am familiar gent as provided for in Chapter 608, Fla	ppointment as registere ions of all statutes with and accept the	ed
	\$ 100.	00 Filing Fee for Application		

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) SECRETARY OF STATE



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SELARE LAFEY OF STATE ALLAHASSEE, FLORIDA

#### 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, BIO-NUTRA MANUFACTURING, 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 March 13, 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 July 21, 2008.

ROSS MILLER

Secretary of State

Certification Clerk