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2009 FEB 11 AH 9: 56
SECKETARY OF STATE

C. LEWIS
FEB 12:2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Saint Howons (Name of Limit	ted Liability Company)
	polity Company for Authorization to Transact Business in comitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	atter to the following:
<u>George</u>	me of Person)
SAINT HONO	n/Company)
2507 B Son TH	MacDill Aue. (Address)
TAMPA, FL (City/Sta	33629 te and Zip Code)
For further information concerning this matter, plea	ise call:
GEORGE MARTIN (Name of Person)	at (813) 995-4844 (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: \$\sum_{125.00}\$ \text{Filing Fee} \text{\$\sum_{130.00}\$ \text{Filing Fee} & Certificate of \$\text{\$\sum_{100}}\$	\$155.00 Filing Fee & \$\Bigcup\$\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy



February 10, 2009

GEORGE MARTIN 2507 B SOUTH MACDILL AVE. TAMPA, FL 33629 US

SUBJECT: SAINT HONORE, LLC OF NEVADA

Ref. Number: W09000006435

We have received your document for SAINT HONORE, LLC OF NEVADA and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please correct the document so that the name reads Saint Honore of Nevada, LLC. You can't have anything after the LLC suffix.

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.

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) 245-6047.

Letter Number: 009A00004717

Carolyn Lewis Regulatory Specialist II

Division of Communities D.O. DOV 6207 Mellaharras Elavida 20214

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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	R A FOR	EIGN
Spint Hanne 111		
1. Saint Honore LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."	")	
SAINT HONOVE OF NEVERDA LIC	•	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Company," "L.L.C.," "LLC.")	of the will Liability	ritten y
2. VEVADA U.SA (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)		
4. U2/05/2009 5. Perpetual (Date of Organization) (Duration: Year limited liability company will ceaexist or "perpetual")	ise to	
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 2504 B. South MALDIN AUE		
Trimpa, FL. 33629 (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: 2507 B. South MacDill AVE - George A Tampa, FL. 33629	<u>lar</u>	tin
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langual 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:		ds in
And Development Kitchen		
Signature of a member of 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	SECRETARY	700 FEB - 1
r -	TIC	

FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE 2009 FEB 11 AM 9: 56

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:
Saint HONORE, LLC
If name unavailable, the alternate name to be used in the state of Florida is:
Saint Honore of Nevada LLC
2. The name and the Florida street address of the registered agent and office are:
GEORGE MARTIN
Florida Street Address (P.O. Box NOT ACCEPTABLE)
TAMPA FL 33602 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)

As managing Member and Sole Member of Saint Honore, LLC, a Nevada Corporation, E0058462009-5. I George Martin do Authorize for purposes of operating in the State of Florida, the alternate name of SAINT HONORE Of Nevada, LLC

SAINT HONORED! NOVALLEY LEC

if my Nevada Registered Name of Saint Honore, LLC is not available in the State of Florida.

George Martin

Managing Member

Saint Honore, LLC

James Houser

Witness:

Date: Z/4/

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, SAINT HONORE, 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 5, 2009, 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 February 11, 2009.

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20090211-2546
You may verify this electronic certificate
online at http://www.nvsos.gov/