## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : QUARLES & BRADY LLP

Account Number : I20000000067 : (239)262-5959 Phone : (239) 434-4999 Fax Number

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

Johnsonville Sausage, LLC

Certificate of Status	0
Certified Copy	0
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**EXAMINER** 

4/29/2009

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

	YCOMPANYTO TRANSACT BUSINE		E FOLLOWING IS SUBMITTED TO RE COFFLORIDA:	ABARA PUNE
JOHNSON	VILLE SAUSAGE, LLC			至约
	(Name of Foreign	Limited Liability	(Company)	5.32
DELAWARE	<u> </u>	3.		
(Jurisdiction un company is orga	der the law of which foreign limited mized)	liability	( FEI number, if applicable)	
JANUARY	18, 2000	5. PE	RPETUAL	ا به سیر خوات
(	Date of Organization)	(D	uration: Year limited liability company vist or "perpetual")	will conne to
UPON QUA	ALIFICATION			
	(Date first transacted businesses (See sections 608.501 & 60	ness in Florida, it 5.502 F.S. to detr	prior to registration.) rmine penalty liability)	<del></del>
N6928 JOH	INSONVILLE WAY		<u> </u>	*******
SHEBOYGA	N FALLS, WI 53085			
	(Street	Address of Prince	cipal Office)	
JOHNSON	VILLE FOODS, INC., N6928	JOHNSONVIL	LE WAY, SHEBOYGAN FALLS,	, W1 53085
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	Rajoh (	Stalle		
	Typed or	printed name		

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# 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:

JOHNSONVILLE SAUSAGE, LLC

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

NAPLES-LAWDOCK, INC.

(Name)

1395 PANTHER LANE, SUITE 300

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

NAPLES

FL 34109-7874

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.

NAPLES-LAWDOCK, INC.

Susan T. Lapinski, Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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# Delaware

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### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JOHNSONVILLE SAUSAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF APRIL, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JOHNSONVILLE SAUSAGE, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JANUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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You may verify this certificate onli

Jeffrey W. Bullock, Secretary of State

DATE: 04-29-09

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