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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
L. SELLERS			
MAR 11 2010			
EXAMINER			

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SECRETARY OF STATE
AND AMASSEF, FLORIDA



March 8, 2010

VIA FEDERAL EXPRESS 2ND DAY MAIL

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: A-1 International Foods, LLC

Foreign Limited Liability Company Application For Registration

Dear Sir or Madam:

Enclosed please find the following original items for filing with the Division of Corporations:

- 1. Cover Letter;
- 2. Application for authorization to transact business in Florida;
- 3. Certificate of Designation of Registered Agent / Registered Office; and
- 4. Certificate of Good Standing from applicant's domiciliary state (CA); and
- 5. Check No. 00452604 payable to your order in the amount of \$130.00.

If the enclosures meet with your approval, kindly process the enclosed paperwork and return a conformed copy, or proof of the filed documents to my attention. If you should have any questions or concerns related to this filing, please do not hesitate to contact me by telephone at (904) 940-2415 or email at Kira.Soto@kehe.com.

Sincerely,

Kira H. Sot Paralegal

Encls.

cc: CT Corp.

COVER LETTER

TO:

Registration Section

Divisio	n of Corporations				
SUBJECT:	A-1 International Foods, LLC				
	Name of Limited Liability Company				
	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of neck 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:				
	Justin A. Mallot, Corporate Counsel				
	Name of Person				
	Tree of Life, LLC				
	Firm/Company				
,	405 Golfway West Drive				
	Address				
	St. Augustine, FL 32095				
	City/State and Zip Code				
	justin.mallot@treeoflife.com				
	E-mail address: (to be used for future annual report notification)				
For further inform	nation concerning this matter, please call:				
	Kira H. Soto, Paralegal at (904) 940-2415				
	Name of Person Area Code & Daytime Telephone Number				
Division	NG ADDRESS: of Corporations bion Section c 6327 STREET ADDRESS: Division of Corporations Registration Section Clifton Building				
	see, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a c	heck for the following amount:				
\$125.0	00 Filing Fee \$\bigcup \$130.00 Filing Fee & \bigcup \$155.00 Filing Fee & \bigcup \$160.00 Filing Fee, Certificate Copy of Status & Certified Copy				

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: A-1 International Foods, 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.") California, USA (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 7/24/1964 Percetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 900 N. Schmidt Road Romeoville, IL 60446 (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: Christopher Meyers, 900 N. Schmidt Road, Romeoville, IL. 60446 Brandon K. Barnholt, 900 N. Schmidt Road, Romeoville, IL 60446 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: To engage in any lawful activity permitted by the Florida Ltd. Liability Company Act to the extent allowed by Act land 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.)

Christopher Meyers
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:		
A-1 International Fo	ods, LLC	
If unavailable, the alternate to be used in the state of Flo	rida is:	
2. The name and the Florida street address of the registe	ered agent and office are:	
CT Corporation S	System	
(Name)		
1200 South Pine Isla	and Road	
Florida Street Address (P.O. Box	NOT ACCEPTABLE)	
Plantation FL	33324	
City/State/2	Zip	
Having been named as registered agent and to accept service liability company at the place designated in this certificate, agent and agree to act in this capacity. I further agree to a relating to the proper and complete performance of my duty obligations of my position as registered agent as provided for the proper and complete generates agent as provided for the proper and complete generates agent as provided for the proper agent agent as provided for the proper agent agent agent as provided for the proper agent	. I hereby accept the appointment as comply with the provisions of all state ies, and I am familiar with and accep	registere utes pt the
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\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

\$ 5.00

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State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: A-1 INTERNATIONAL FOODS, LLC

FILE NUMBER:

201003210025

FORMATION DATE:

01/29/2010

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

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

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 5, 2010.

DEBRA BOWEN Secretary of State