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PICK-UP WAIT MA	AIL			
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SECKETARY OF STATE
DIVISION OF CORPORATION
SECRETARY OF STATE
SECRETAR

2854

PROFESSIONAL CHEF FOODS, LLC

12200 SW 117 Avenue Miami, Florida 33186

Phone: 305-232-7198 Fax: 305-232-4085

December 15, 2010

Ms. Brenda Tadlock
Florida Department of State
Division of Corporations, Registration Section
Clifton Building 2661 Executive Center Circle
Tallahassee, Florida 32301

for Authorization to Transact Business in Florida

Dear Ms. Tadlock:

Re:

First of all thank you very much for your kind help regarding my request for submitting the necessary form pertaining to the above referenced filing. Enclosed please find the following:

Professional Chef Foods, LLC – Application for Foreign Limited Liability Company

- 1. Cover Letter
- 2. Application
- 3. Certificate of Designation of Registered Agent
- 4. Copy of the Certificate of Formation from the State of Delaware for Professional Chef Foods, LLC.
- 5. Check in the amount of \$125.00 for the filing fee

If you have any questions please do not hesitate to call me, or Gloria Gutierrez, my assistant, at 305-232-7198.

Again, many thanks for your attention to my request and I remain.

Sincerely,

Slovia Dutiens,
Fox Michael A. Nunez

MAN/gg encls

COVER LETTER

Registration Section

TO:

Divisio	n of Corporations			
SUBJECT:	PROFE	SSIONAL CHEF FOODS, LLC		
	Na	ame of Limited Liability Company		
The enclosed "A Existence, and co	pplication by Foreign Limited Lia heck are submitted to register the a	bility Company for Authorization to Transact Business in Fabove referenced foreign limited liability company to transa	lorida," Certificate of ct business in Florida	
Please return all	correspondence concerning this m	natter to the following:		
	,	Miguel A. Nunez		
		Name of Person		
	PROFES	SIONAL CHEF FOODS, LLC		
		Firm/Company	· ,	
	1	12200 SW 117 Avenue		
		Address		
		Miami, FL 33186		
	City/State and Zip Code			
		utierrez@aplusmini.com		
	E-mail address: ((to be used for future annual report notification)		
For further infor	mation concerning this matter, ple	ase call:		
	Gloria Gutierrez	at (305-232-7198	<u>-</u>	
	Name of Person	Area Code & Daytime Telephone Number		
Division Registra P.O. Bo	n of Corporations ation Section bx 6327 ssee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	check for the following amou Filing Fee \$130.00 Filing F Certificate of Sta	ee & \$155.00 Filing Fee & \$160.00 Filing Fee, C		

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:

ЦМ	ITTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1	PROFESSIONAL CHEF FOODS, LLC		٠.
_	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."))	
<u></u>		C.1	•
(If r	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited"	ot the v Liabili	vrittei ty
	npany," "L.L.C," "LLC.")		•
2.	Delaware		
(<u>)</u>	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) ompany is organized)	-	
4.	October 13, 2010 5. Perpetual		
	(Date of Organization) (Duration: Year limited liability company will cease exist or "perpetual")	se to	
6.	N/A		ت
٠	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	5	Zy.
		图	
7.	12200 SW 117 Avenue		유도
	Miami, FL 33186	9	64 64 64 64 64 64 64 64 64 64 64 64 64 6
-	(Street Address of Principal Office)	<u> </u>	79.55 04.55
		ယ္	AF
8.]	If limited liability company is a manager-managed company, check here 🔀	2	CORPORATIONS
Q '	The name and usual business addresses of the managing members or managers are as follows:		.,
٦.			
	Raul L. Nunez – 12200 SW 117 Avenue, Miami, FL 33186		
	Miguel A. Nunez – 12200 SW 117 Avenue, Miami, FL 33186		
			
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody	ofreco	ords in
•	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign languag	ge, a	
trans	slation of the certificate under oath of the translator must be submitted.)	• •	
11.	Nature of business or purposes to be conducted or promoted in Florida:		
	Restaurant and market		
-	\sim	·	
	Clear free		
	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 I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		
	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 Compa	any is:		
· · · · · · · · · · · · · · · · · · ·	PROFESSIONAL (CHEF FOODS, LLC		
If unavailable, the a	lternate to be used in the	state of Florida is:		
2. The name and th	e Florida street address o	of the registered agent and office are:		110
	Atrium Re	gistered Agents, Inc	10 DEC	75.5 25.5 25.5
		(Name)	C 16	H OF CO
	1500 San Remo Avenue, Ste. 125			201-
٠	Florida Str ee t Addı	ess (P.O. Box <u>NOT</u> ACCEPTABLE)	PM 3: 5	S IATE DRATIO
	Coral (Gables, FL 33146		*
		City/State/Zip	-	
liability company at agent and agree to a relating to the prope	the place designated in th oct in this capacity. I furth r and complete performa	o accept service of process for the about is certificate, I hereby accept the appoint agree to comply with the provisioning of my duties, and I am familiar with as provided for in Chapter 608, Floriture)	ointment as registered is of all statutes th and accept the	
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional)		

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PROFESSIONAL CHEF FOODS, 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 SIXTEENTH DAY OF DECEMBER, A.D.

2010.

4884040 8300

101199526

DATE: 12-16-10

You may varify this certificate online at coxp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State
ENTYCATION: 8435893