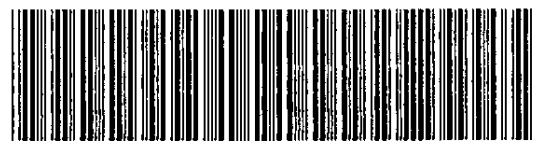


M110000006918



700193606047

02/10/11--01031--012 \*\*160.00

(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:

Office Use Only

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 21 PM 4:06

T. HAMPTON  
FEB 21 2011  
EXAMINER

Handwritten scribbles

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Island Shaved Ice, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check 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:

*PS - Dault*  
*10*  
*6000 Benninghway LLC*  
*Chokolat-Nut*  
*US 118*

Dawn Dault  
Name of Person

Island Shaved Ice  
Firm/Company

4327 S. Hwy 27 Suite 123  
Address

Clermont, FL 34711  
City/State and Zip Code

ddault5@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:  
Dawn Dault 734 216 3323  
Scott Dault at 734 216-6148  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

11 FEB 21 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 11, 2011

DAWN DAULT  
6 CAVANAUGH LAKE  
CHELSEA, MI 48118

SUBJECT: ISLAND SHAVED ICE, LLC  
Ref. Number: W11000008411

We have received your document for ISLAND SHAVED ICE, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

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.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 011A00003654

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. TERMINATOR OUTDOOR LASER TAG 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.")

2. Michigan 3. 26-4420171  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1-18-2011 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 4327 S Hwy 27 Suite 123  
Clermont, FL 34711  
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here  member managed

9. The name and usual business addresses of the managing members or managers are as follows:  
4327 S. Hwy 27 Dawn Dault  
Suite 123 MGRM  
Clermont, FL 34711

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: The Sale  
of Shaved Ice  
Dault

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.)

Dawn Dault  
Typed or printed name of signee

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 21 PM 4:06

**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:

TERMINATOR OUTDOOR LASER TAG LLC

If unavailable, the alternate to be used in the state of Florida is:

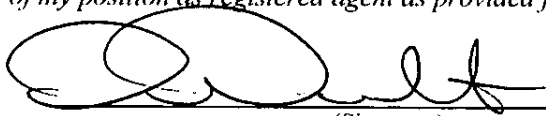
2. The name and the Florida street address of the registered agent and office are:

Dawn Powell  
Dawn Powell LLC  
(Name)

4327 S Hwy 27 Suite 123  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

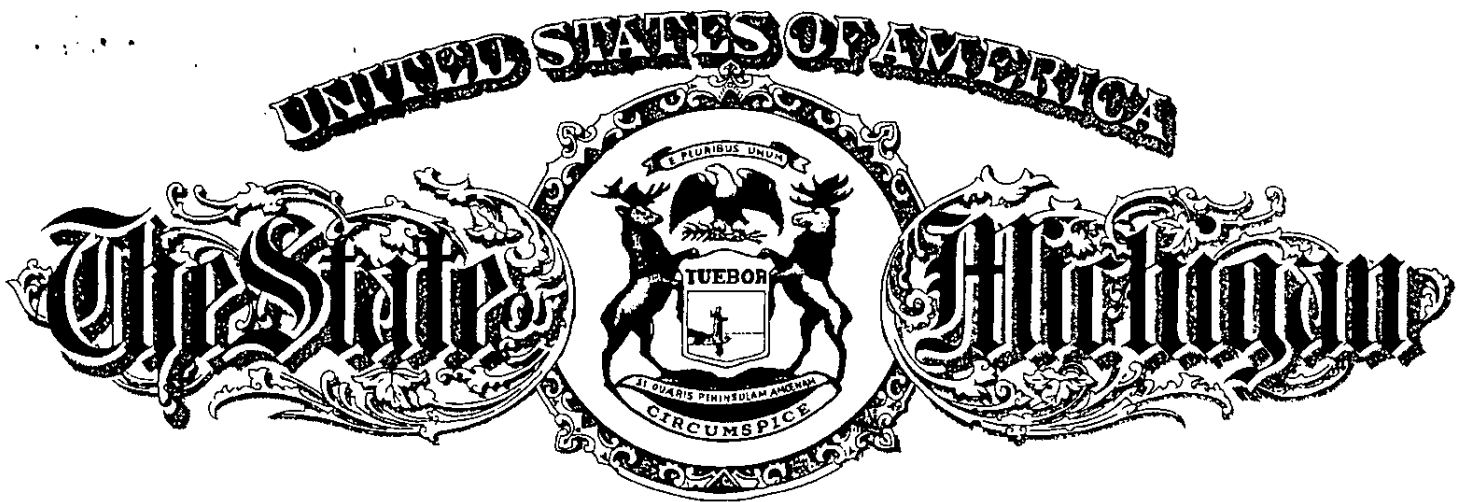
Clermont FL 34711  
City/State/Zip

*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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 21 PM 4:06



Department of Energy, Labor & Economic Growth

Lansing, Michigan

*This is to Certify That*

**TERMINATOR OUTDOOR LASER TAG LLC**

*was validly organized on March 10, 2009 as a Limited Liability Company.*

*I FURTHER CERTIFY that a Certificate of Assumed Name, for the name ISLAND SHAVED ICE, was filed on January 18, 2011.*

*I FURTHER CERTIFY that said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.*

*This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*

*In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 16th day of February, 2011.*

*Director*  
Bureau of Commercial Services