# M 11000002579

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**EXAMINER** 



100207499401

DEPARTIEUT DE STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

RECEIVED

DIVISION OF CORPORATIONS

11 MAY 20 PH 1: 17



ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION

COST LIMIT

ORDER DATE: May 19, 2011

ORDER TIME : 4:32 PM

ORDER NO. : 784127-005

CUSTOMER NO: 4802976

#### FOREIGN FILINGS

NAME: PRODUCE ALLIANCE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY \_\_\_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER:

### COVER LETTER

Division of Corporations	
SUBJECT: PRODUCE ALLIANCE, L	
	f Limited Liability Company)
	ed Liability Company for Authorization to Transact Business are submitted to register the above referenced foreign limited ida
Please return all correspondence concerning t	his matter to the following:
	(Name of Person)
	(Name of Person)
	(Firm/Company)
	(Address)
(Ci	ty/State and Zip Code)
For further information concerning this matter	r, please call:
Sarah Pinheiro, Loeb & Loeb LL	AP at (212 ) 407-4898  (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fe Certifies	ee & <b>Z</b> \$155:00 Filing Fee & <b>S</b> 160:00 Filing Fee, Certificate ate of Status Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION FOR 502 FLORIDAS	ייסדוו ודגידי	THE FOLLOWING IS SUBMITTED TO REGISTER A SORE
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS	INTHE ST	THE POLITOWING IS SOBWITTED, TO RESISTER A STATE OF FLORIDA:
PRODUCE ALLIANCE, LLC		TATE OF FLORIDA:
(Name of Foreign Limited Liability Company; mu	ıst include	"Limited Liability Company," "L.L.C.," or "LLC.")
		of transacting business in Florida and attach a copy of the wr ate name. The alternate name must include "Limited Liability
Company," "L.L.C.," "LLC.")		·
Illinois	3.	
(Jurisdiction under the law of which foreign limited lia company is organized)	ībility	( FEI number, if applicable)
08/01/1996	5.	Perpetual
(Date of Organization)	- " ,	(Duration: Year limited liability company will cease to exist or "perpetual"):
(Date first transacted busines (See sections 608.501 & 608.5	s in Floric	la, if prior to registration.) determine penalty liability)
100 LEXINGTON DR STE 201 BUF		· · · · · · · · · · · · · · · · · · ·
TOO BEAR OF ON BREAT BOT	TILO	OKO V E, 115 000007
(Street A	ddress of	Principal Office)
. If limited liability company is a manager-ma	naged co	ompany, check here
	_	
The name and usual business addresses of the	e managi	ing members or managers are as follows:
GEORGE MELSHENKER		
100 LEXINGTONF DR STE 201 B	TIEENT (	O CROVE TI COOO
200 ZZMINGTONI DK DIE ZUI B	OFFALI	O GROVE, IL 60089
	-,	s old, duly authenticated by the official having custody of record not acceptable. If the certificate is in a foreign language, a
ristation of the certificate under oath of the translator must		
·		
. Nature of business or purposes to be conduc	eted or pi	romoted in Florida: To engage in any act or
activity for which LLC's are governed		
Sala P.	rhe	TW
Signature of a member or	an autho	orized representative of a member.
(In accordance with section 608.40	08(3), F.S.,	the execution of this document constitutes that the facts stated herein are true.)
Sarah-Nicole Pinheiro		

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.

of the Limited Liability Company is:
E ALLIANCE, LLC
ailable, the alternate name to be used in the state of Florida is:
and the Florida street address of the registered agent and office are:
Corporation Service Company
(Name)
1201 Hays Street
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee FL 32301
City/State/Zip
and the Florida street address of the registered agent and office are:  Corporation Service Company (Name)  1201 Hays Street  Florida Street Address (P.O. Box NOT ACCEPTABLE)  Tallahassee  FL 32301

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.

Corporation Service Company Matthew Young
BY: Matthew Young
Asst. V. Pres.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

File Number

0007816-6



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

PRODUCE ALLIANCE, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 01, 1996, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1113902290

Authenticate at: http://www.cyberdriveillinois.com

## In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 19TH

day of

MAY

A.D.

2011

Desse White

SECRETARY OF STATE