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EXAMINER



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07/29/11--01004--008 **155.00

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 1 UL 20 MIG. 25 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT:** KATIE WONSCH DATE: 07/29/2011 **REF. #:** 001988.151945 CORP. NAME: POPCORNOPOLIS LLC () ARTICLES OF DISSOLUTION () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK () ANNUAL REPORT () FICTITIOUS NAME () LIMITED LIABILITY (XX) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () WITHDRAWAL () REINSTATEMENT () MERGER () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 540 831 FOR \$ 155.00 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

PLEASE RETURN:

(XX) CERTIFIED COPY

() CERTIFICATE OF GOOD STANDING

COST LIMIT: \$____

() PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

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

TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 603.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Ш	MITED LIABILITY COMPANY TO TRANSACT BUSINISSS IN THE STATE OF FLORIDA:
١.	Popcornopolis LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC,")
2	Delaware 3, 61-1513574
	(Jurisdiction under the taw of which foreign limited liability (FEI number, if applicable) company is organized)
4.	11/27/2006 5 perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "purpetual")
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 P.S. to determine penalty liability)
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	224 Oregon Street
	El Segundo, CA 90245 (Street Address of Principal Office)
	(Sirce: 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:
	Wallis D. Arnold, 224 Oregon Street, El Segundo, CA 90245
th	 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a unstation of the certificate under oath of the translator must be submitted.)
1	Nature of business or purposes to be conducted or promoted in Florida:
	wholesale and retail food products
	4000 ds XV CV
	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
	possitios 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.) Wallis D. Arnold

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	of the Limited Liability Company is:	
Popcornopolis LLC		
If unavailable,	the alternate to be used in the state of Florida is:	
2. The name a	and the Florida street address of the registered agent and office are:	
	NRAI Services, Inc.	
	(Name)	
	515 E. Park Avenue Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee, FL 32301 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.

Seard, as assist-sect. for 'NO. (Signature) NRAISERVICES INC.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POPCORNOPOLIS, 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-EIGHTH DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID
"POPCORNOPOLIS, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF
NOVEMBER, A.D. 2006.

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

4259919 8300

110870040

AUTHENTICATION: 8934872

DATE: 07-28-11

You may verify this certificate online at corp.delaware.gov/authver.shtml