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EXAMINER



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DEFARTHENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED



CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST, PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT:** RICKY SOTO DATE: 12/09/2011 **REF. #:** 000162.158562 CORP. NAME: BRAVO FOODS, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME (XX) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 542540 FOR \$ 185.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$

PLEASE RETURN:

(XX) CERTIFIED COPY (2 NEEDED)() CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY () CERTIFICATE OF STATUS

Examiner's Initials

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 RUSINESS, IN THE STATE OF FLORIDA:

	urpose of transacting business in Florida and attach a copy of the writter
Company," "L.L.C," "LLC.")	alternate name. The alternate name must include "Limited Liability
2. DELAWARE	3. 45-3934153
(Jurisdiction under the law of which foreign limited liabili company is organized)	ity (FEI number, if applicable)
4. OCTOBER 14, 2011	5 PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A	
(Date first transacted business ir (See sections 608.501 & 608.502	n Florida, if prior to registration.) F.S. to determine penalty liability)
7. 1146 CELEBRATION BLVD.	F.S. to determine penalty liability)
CELEBRATION, FL 34747	0F 0
	ress of Principal Office)
3. If limited liability company is a manager-manag	ress of Principal Office) ged company, check here managing members or managers are as follows:
9. The name and usual business addresses of the n	managing members or managers are as follows:
Andrew J. Rosen, 1146 Celebration Blvd	
Andrew C. Pesseri, 1140 Gelebration Blvd	i, Celebration, i L 34/4/
10. Attached is an original certificate of existence, no more than	190 days old, duly authenticated by the official having custody of records in
he jurisdiction under the law of which it is organized. (A photo	ocopy is not acceptable. If the certificate is in a foreign language, a
he jurisdiction under the law of which it is organized. (A photo ranslation of the certificate under eath of the translator must be	submitted.)
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under eath of the translator must be:	ocopy is not acceptable. If the certificate is in a foreign language, a submitted.)
he jurisdiction under the law of which it is organized. (A photo ranslation of the certificate under eath of the translator must be	ocopy is not acceptable. If the certificate is in a foreign language, a submitted.)
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under eath of the translator must be:	ocopy is not acceptable. If the certificate is in a foreign language, a submitted.)
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be: 11. Nature of business or purposes to be conducted RESTAURANTS Signature of a member or an	ocopy is not acceptable. If the certificate is in a foreign language, a submitted.)

Typed or printed name of signee

THOMAS J. GOEGLEIN

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.

BRAVO FOO	DS, LLC	
If unavailable, the al	ternate to be used in the state of Florida is:	
2. The name and the	Florida street address of the registered agent and office are:	
NRA	N Services, Inc.	
	(Name)	
515	East Park Avenue	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tal	lahassee _{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, Floridu Statutes.

\$ 25.00 Designation of Registered Agent

Filing Fee for Application

\$ 30.00 Certified Copy (optional)

\$ 100.00

\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BRAVO 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 NINTH DAY OF DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRAVO FOODS, LLC" WAS FORMED ON THE FOURTEENTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5051984 8300

111275044

DATE: 12-09-11

AUTHENTACATION: 9215202

Jeffrey W. Bullock, Secretary of State

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