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SECRETARY OF STATE

D. BRUCE

FEB 24 2012

EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE : 106272

AUTHORIZATION

COST LIMIT

ORDER DATE : February 23, 2012

ORDER TIME : 3:0 PM

ORDER NO. : 106272-005

CUSTOMER NO: 7175508

FOREIGN FILINGS

NAME: FIVE VOTES, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)	유	72	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	TAHASS	FEB 23	
XXCERTIFIED COPY XXPLAIN STAMPED COPY XXCERTIFICATE OF GOOD STANDING	LES EDUIT	M 9: 8	

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

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

IJMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:
SAWGRASS LIFESTYLES LLC (Name of Foreign Limited Liability Company; must include the company)	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability
2. DELAWARE 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. FEBRUARY 16, 2012 5.	PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON QUALIFICATION	
(Date first transacted business in Flori (See sections 608,501 & 608,502 F.S. to	ida, if prior to registration.) o determine penalty liability)
7. 99 Hook Road, Section 5	
Bayonne, New Jersey 07002	
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	ompany, check here 🔀
9. The name and usual business addresses of the manag	ging members or managers are as follows:
Michael J. Setola, Tharanco Retail LLC, 99 Hook R	oad, Section 5, Bayonne, New Jersey 07002
Scott Kane, Tharanco Retail LLC, 99 Hook Road, S	Section 5, Bayonne, New Jersey 07002
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is	· · · · · · · · · · · · · · · · · · ·
translation of the certificate under oath of the translator must be submit	
11. Nature of business or purposes to be conducted or p	romoted in Florida: Any lawful business
that may be conducted by a limited liability company	in Florida.
DUNKE	元 72
	orized representative of a member.
(In accordance with section 608,408(3), F.S., the execution penalties of perjury that the facts stated herein are true. I document to the Department of State constitutes a	on of this document constitutes an affirmation under the I am aware that any false information submitted in A third degree felony as provided for in s.817.155, F.53.
Scott Kane, Authorized Represent	tative
. Typed or printed n	ame of signee

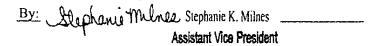
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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.

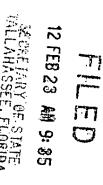
1. The name of	the Limited Liability Company is	s:
SAWGRASS I	IFESTYLES LLC	
If unavailable, t	he alternate to be used in the state	of Florida is:
2. The name an	d the Florida street address of the	registered agent and office are:
	Corporation Service Company	
	()	Vame)
	1201 Hays Street	
	Florida Street Address (P	O. Box <u>NOT</u> ACCEPTABLE)
	Tallahassee	FL 32301
	Ci	ly/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.

Corporation Service Company,



\$ 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 "SAWGRASS LIFESTYLES 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-THIRD DAY OF FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAWGRASS LIFESTYLES LLC" WAS FORMED ON THE SIXTEENTH DAY OF FEBRUARY, A.D. 2012.

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

5110985 8300

120213512

Jeffrey W Bullock. Secretary of Stal **AUTHENTYCATION:** 9385457

DATE: 02-23-12

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