(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



400235226224

2012 HAY 30 AM 9: 59

MAY 31 2012

**EXAMINER** 



ACCOUNT NO. : I20000000195

REFERENCE : 220184 5165575

AUTHORIZATION : COST LIMIT : \$180.00

ORDER DATE : May 29, 2012

ORDER TIME : 12:46 PM

ORDER NO. : 220184-005

CUSTOMER NO: 5165575

FOREIGN FILINGS

NAME: LESUTRA, LLC

XXXX QUALIFICATION (TYPE: LL)

CONTACT PERSON: Becky Peirce -- EXT# 2919

\_ CERTIFICATE OF GOOD STANDING

CERTIFIED COPY
PLAIN STAMPED COPY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER:

#### **COVER LETTER**

	ion to Transact Business in Florida," Certificate o
stence, and check are submitted to register the above referenced foreign limite se return all correspondence concerning this matter to the following:    Jonathan Webb	ed liability company to transact business in Florida
Jonathan Webb  Name of Person  LeSutra, LLC  Firm/Company	
Jonathan Webb  Name of Person  LeSutra, LLC  Firm/Company	2012 MAY 30 AM 9: 59 SECRETARY OF STATE SECRETARY OF STATE OFIDA
Name of Person  LeSutra, LLC  Firm/Company	
LeSutra, LLC Firm/Company	·
Firm/Company	. · -3
35 Sawgrass Drive	125
Address	555 555 555 555 555 555 555 555 555 55
Bellport, New York 11713	Fig. 3
City/State and Zip Code	- 109 9: 5 9: 5
jwebb@drinklesutra.com	Orn 9
E-mail address: (to be used for future annual re	port notification)
further information concerning this matter, please call:	
at (	396-2458
Name of Person Area Code & Daytime To	elephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations	
Registration Section Registration Section	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle	le
Tallahassee, FL 32301	

### 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 LIARILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF ELORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:
LeSutra, LLC	
(Name of Foreign Limited Liability Company; must include	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.	45-4657885
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. February 13, 2012 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	ASE TO T
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	o determine penalty liability)
7. 1800 NE 171st Street	ASST ASST
North Miami, Florida 33162	
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed c	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9. The name and usual business addresses of the manag	ging members or managers are as follows:
1800 NE 171st Street Jonathan Webb	
North Miami, Florida 33162	
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 in translation of the certificate under cath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	romoted in Florida: Distributor of Wine
and Spirits	
// <u>//</u>	·
	<u> </u>
Signature of a member or an auth- (In accordance with section 008.408(3), F.S., the execution	orized representative of a member.
penalties of perjury that the facts stated herein are true.	I am aware that any false information submitted in a
	third degree felony as provided for in s.817.155, F.S.)
ionaidan Wenn	

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 the Limited Lia	ability Company is:	
LeSutra, LLC		
If unavailable, the alternate to b	be used in the state of Florida is:	
2. The name and the Florida str	reet address of the registered agent and office are:	. 2
Jonathan Webb		2012 HAY 30 SECRETASS
	(Name)	3 -
1800 NE 171st	Street	7.11
Flor	rida Street Address (P.O. Box NOT ACCEPTABLE)	
North Miami	FL 33162	9: 59 STATE LURIUM
*	City/State/Zip	
Having been named as registered	d agent and to accept service of process for the above	stated limited

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.

/s/ Jonathan Webb	
(Sig	nature)
Jonathan Webb	
Ø 100 0	
\$ 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 "LESUTRA, 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-NINTH DAY OF MAY, A.D. 2012.

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

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

2012 HAY 30 AM 9: 59
SECRETARY OF STATE
SECRETARY OF STATE

5108729 8300

120651078

Jeffrey W Bullock, Secretary of S

AUTHENTY CATION: 9602224

DATE: 05-29-12

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