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SECRETARY OF STATE
JALLAHASSEE, FLORID

B. BOSTICK SEP 1 0 2012

**EXAMINER** 

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: WEST INDIES ORGA	ANIC LLC
N	lame of Limited Liability Company
The enclosed "Application by Foreign Limited Li Existence, and check are submitted to register the	ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this r	matter to the following:
ANGELICA BRAVO	
	Name of Person
WEST INDIES ORGANI	CLLC
	Firm/Company
450 ALTON RD, SUIT	E 1104
	Address
MIAMI BEACH, FL 331	39
	City/State and Zip Code
ABRAVO@CAUSEV	VAYCC COM
E-mail address:	(to be used for future annual report notification)
For further information concerning this matter, ple	ease call:
ANGELICA BRAVO	at (305 ) 807-3286 ≨€ 🛱 🙀
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	Area Code & Daytime Telephone Number  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amo  \$125.00 Filing Fee \$130.00 Filing Fee Certificate of St	ount: Fee & \$155.00 Filing Fee & \$\sqrt{\$160.00 Filing Fee, Certificate}\$

### 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 BUSINESS IN THE STATE OF FLORIDA:

WEST INDIES ORGANIC LLC	ATEOF FLORIDA:
(Name of Foreign Limited Liability Company; must include	"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 alterna Company," "L.L.C," "LLC.")	
DELAWARE     (Jurisdiction under the law of which foreign limited liability company is organized)  3.	46-0911337 (FEI number, if applicable)
4. 08/23/2012 5. Date of Organization)	PERPETUAL  (Duration: Year limited liability company will cease to exist or "perpetual")
6. NONE	
(Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	determine penalty liability)
7. 450 ALTON ROAD, SUITE 1104	SEP - AHA
MIAMI BEACH, FL 33139 (Street Address of I	Principal Office)
8. If limited liability company is a manager-managed co	
<ol><li>The name and usual business addresses of the managi BRYAN J LOGAN, MGRM 450 ALTON ROAD</li></ol>	•
BRIAND EOGAIN, WORW 430 ALTON ROAD	, SUITE 1104, MIAMI BEACH, FE 33139
10. Attached is an original certificate of existence, no more than 90 days the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submitted.	not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or pr	omoted in Florida:
ANY AND ALL LAWFUL BUSINESS.	· · · · · · · · · · · · · · · · · · ·
Enten J Coga	
Signature of a member or an autho (In accordance with section 608.408(3), F.S., the execution	
penalties of perjury that the facts stated herein are true. I	
BRYAN J LOGAN	and degree reiony as provided for in 5.017.122, 1.3.)

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 Liability Company is:			
WEST INDIES ORGANIC LLC			_
If unavailable, the alternate to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:			<del></del>
BRYAN J LOGAN (Name)	NY TRALE	12 SEP	-3-3
450 ALTON ROAD, SUITE 1104		-7	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ELORID,	94 :O 148	J
MIAMI BEACH, FL 33139  City/State/Zip	_ <b>&gt;</b>	ഗ	

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.

Bryan J. Cogan.
(Signature)

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

# Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WEST INDIES ORGANIC 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 AUGUST, A.D. 2012.

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120963025

DATE: 08-23-12

AUTHENTICATION: 9799419

Jeffrey W. Bullock, Secretary of State

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