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(Requestor's Name)		
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COVER LETTER

то:	Registration Section Division of Corporations			
SUBJE				
		Name of Limited Liability Co		
The encl Existence	losed "Application by Foreign Limited Lee, and check are submitted to register the	Liability Company for Author te above referenced foreign lit	ization to Transact Business in Flor nited liability company to transact be	ida," Certificate of ousiness in Florida
Please re	eturn all correspondence concerning this	matter to the following:		
	Shannon Hutto	Name of Person		_
		rame of reison		
	GetSome Products LLC			_
		Firm/Company	•	
	1075 N Ronald Reaga	an Blvd		
		Address		
	Longwood, FL 32750			_ ,
		City/State and Zip Code		
	accounting@getsom	neproducts.com : (to be used for future annua		_
For furth	er information concerning this matter, p		report notification)	
i Oi iuitii	er information concerning this matter, p			<i>J</i> .
9	Shannon Hutto	at (407) 830-4669	_
	Name of Person	Area Code & Daytim	e Telephone Number	
	MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations		
F	Registration Section	Registration Section		
	P.O. Box 6327 Fallahassee, FL 32314	Clifton Building 2661 Executive Center C	ircle	
•	. 41.41.41.41.41.41.41.41.41.41.41.41.41.4	Taliahassee, FL 32301		
Enclosed \$	d is a check for the following amount 125.00 Filing Fee \$\sqrt{\$130.00 Filing }\$\text{Certificate of St.}\$	Fee & \$\int\\$155.00 Filing Fe	e & 5160.00 Filing Fee, Cerof Status & Certifie	
,				

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 LIARIE ITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. GetSome Products LLC		
(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 of transacting business in Florida and attach a cop consent of the managers or managing members adopting the alternate name. The alternate name must include "Limite Company," "L.L.C," "LLC.")	y of the	— e written pility
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-0604133 (FEI number, if applicable)		_
4. July 16th 2012 5. Perpetual		
(Date of Organization) (Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	ease to	,
6. November 30th 2012		므
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	2 SEP	SEGRE
_{7.} 1075 N Ronald Reagan Blvd	2	유물구
Longwood, FL 32750		1885 1880 1887
(Street Address of Principal Office)	AM 10:	- WSTS
8. If limited liability company is a manager-managed company, check here	25	TOKS
9. The name and usual business addresses of the managing members or managers are as follows:		
Shannon Hutto 1075 N Ronald Reagan Blvd., Longwood, FL 32750		
Shaw Hutto 1075 N Ronald Reagan Blvd., Longwood, FL 32750		
		_
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang translation of the certificate under oath of the translator must be submitted.)	-	
11. Nature of business or purposes to be conducted or promoted in Florida: Sales		_
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		_•
penalties of perjury that the facts stated herein are true I am aware that any false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, I	ı a	
Shannon Hutto		

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	y is:				
GetSome Products LLC					
If unavailable, the alternate to be used in the st	ate of Florida i	is:			
2. The name and the Florida street address of the registered agent and office are:					
Shannon Hutto					
(Name)					
1075 N Ronald Reagan Blvd Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	·				
Longwood	FL	32750			
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.

\$ 100.00

Filing Fee for Application

\$ 25.00

Designation of Registered Agent

\$ 30.00

Certified Copy (optional)

\$ 5.00

Certificate of Status (optional)

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GETSOME PRODUCTS, 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 FOURTEENTH DAY OF SEPTEMBER, A.D. 2012.

5184524 8300

121031520

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 9847700\)

DATE: 09-14-12

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