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Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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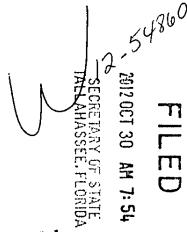
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J. BRYAN

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#### **COVER LETTER**

Division of Corporatio	ns			
SUBJECT:	I Dig Sr	Packs LLC Limited Liability Company		
	ranc or	Emilica Elabiniy Company		
			to Transact Business in Florida," C ability company to transact busines	
Please return all correspondence	concerning this matter to	o the following:		
	Debra A. B.	MelA Namelof Person	<u> </u>	
		ranicjoi i cison	_:9	
	Dig Snacks,	LIC	TALL	. П
	J	Firm/Company	至所 2	<u>ا</u> ــــــ
_701 V	1. Fletcher Ave	nue Sulet	ASSEE	$\Box$
		Address	-11	型し
	Tampa / Flori	da 33619 ty/State and Zip Code	) CORTATE A	7: 54
De	ble C I [ E-mail address: (to be	Dig Snacks 'Co'	notification)	
For further information concern	ing this matter, please cal	1:		
Debra A. Ro	Yeu c of Person	at ( <u>813</u> ) <u>4</u> Area Code & Daytime Telep	563. 8423 Shone Number	
MAILING ADDRESS Division of Corporation		REET ADDRESS:		
Registration Section		gistration Section		
P.O. Box 6327	Clif	fton Building		
Tallahassee, FL 32314		of Executive Center Circle lahassee, FL 32301		
Enclosed is a check for the	following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155,00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN CONTITION F. WITH SIG TRIN ORSOS, FIGRICA STATETES, THE POLITIONING IS NOWHETED TO REGISTER A PORTION - LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
I Dia Snacks, LLC.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company;" "L.L.C.," or "LLC.")
(If name unavailable, oner alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the namagers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. <u>Georgia</u> 3.
2. (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FE) number, if applicable)
4 OS/2()   1   5   Printing Position   5   Printing Position   1   1   2   3   4   4   4   4   4   4   4   4   4
6. Company of the second of th
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F S. to determine penalty liability)
7. 411 Oak Brox Courd Smyrfia , Georgia 3/2082 == =
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Brad! Heather Long- 411 Oak Brook Court Smyrna, GA 30082
Tromas! Dehra Fung 701 W Fletcher Ave Sunc A Jampa, Fl 33610
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under each of the translator must be submitted.)
1) Nature of business or purposes to be conducted or promoted in Florida.
distribution of goods
_ Dirak honus
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 time. I am aware that any false information submitted in a
document to the Department of State constitutes a third degree felony as provided for in s.817 155, F.S.)
Typed or printed name of signee
Typeu of prince 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:	
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:	2012 OCT 30 SECRETAR TALLAHASS
Debra A. Boney	- m- <b>m</b>
701 W. Fletcher Ave. Suite A. Florida Street Address (P.O. Box NOT ACCEPTABLE)	AH 7:54 OF STATE A
Tampa FL 33/010	_

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.

Dilra L Bony (Signature)

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

Control No. 11041309

## STATE OF GEORGIA

## Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

## CERTIFICATE OF

### **EXISTENCE**

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### I DIG SNACKS, LLC

#### **Domestic Limited Liability Company**

was formed or was authorized to transact business on 05/26/2011 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 10th day of October, 2012

B: P.L

Brian P. Kemp Secretary of State

Certification Number: 9362572-1 Reference: 2997-003 Verify this certificate online at http://ccrp.sos.state.ga.us/corp/soskb/verify.asp