Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617~6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878~5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company Dean Management, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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CT CORPORATION

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUR	ECT: Dean Management, LLC		
50.00		Name of Limited Liability Company	
		lability Company for Authorization to Transact Business in Florida," (a above referenced foreign limited liability company to transact business.)	
Please	return all correspondence concerning this	metter to the following:	
	 .	Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	TALLA
		beling@dean-foods_com s: (to be used for future annual report notification)	ALLAHASSE
For fu	rther information concerning this matter, p	•	E. F.C
	Name of Person	at () Area Code & Daytime Telephone Number	ATE PRIDA
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	sed is a check for the following am \$125.00 Filing Fee \$\int_{\text{S130.00 Filing}} \text{Cortificate of S}\$	Fou & S155.00 Filing Fee & \$160.00 Filing Fee, Certificate	

#L037 - 10:05/2010 C T System Online

12 NOV 28 PM 3: 36

FILED

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:

1.	Dean Management, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	•	
co	Fname unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the unsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil ompany," "L.L.C," "LLC.")	written ity	
2	Delaware 3. 75-2587782		
	(Yurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	-	
4.	10/22/2012 5, perpetual		
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")		
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7	2711 N. Haskell Avenue, Suite 3400, Dallas, TX 75204	<u>:</u> 1	
٠.		ALC: SECT	7
	(Street Address of Principal Office)	ETAR VHASS	RZ AON
8.	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:	F STAT	だ ::
	Rachel A. Gonzalez, Sole Manager		9
	2711 N. Haskell Avenue, Suite 3400, Dallas, TX 75204	.jp=	
the	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under oath of the translator must be submitted.)	ords in	
11	. Nature of business or purposes to be conducted or promoted in Florida: Management services		
	Rayell	•	
	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 a document to the Department of State constitutes a third degree follows as provided for in s.817.155, F.S.)		
	Rachel A Convelex Sole Manager		

FL057 - 10/05/2010 C T System Callus

APPROVED

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:	1	
Dean Management,	LLC		-	
If unavailable, th	e alternate to be used	in the state of Plorida is:		
2. The name and	the Florida street ad	dress of the registered agent and office are:	12 NOV 28 SECRETARY TALL AHASSI	Ŀ
(T Corporation System			$\frac{1}{2}$
•		(Name)	AND FILED 28 PM ARY OF ASSEE.	ACK
1	200 South Pine Island Ro	ad	-t1 -t1 -t-1-	1
•	Florida Stre	et Address (P.O. Box <u>NOT</u> ACCEPTABLE)	3: 36 STATE LORID	* #
	Plantation	FL 33324	J>*	
-		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.

C T Corporation System

By: Maria Parta (Signapara)

\$ 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 "DEAN MANAGEMENT, 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-SEVENTH DAY OF NOVEMBER, A.D.
2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

2492741 8300

121265384

You may varify this certificate unline at corp. dalaware. gov/authver.shtml

AUTHENTICATION: 0013200

DATE: 11-27-12