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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Noodlewise, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Nora Snyder		
<u>-</u>	Name of Person	
Noodlewise, LLC		
	Firm/Company	
13798 NW 4th St.,	Suite 300	
	Address	
Sunrise, FL 33325		
City/State and Zip Code		
nsnyder@interacti	vemetronome.com	
E-mail address: (to be	used for future annual report notification)	

For further information concerning this matter, please call:

Nora Snyder

...954

385-4660 x 232

Name of Person

Area Code & Daytime Telephone Number

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

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 COMPLIANCE WITH SECTION 608 503 FLORIDA STATLITES THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	
1. Noodlewise, 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 alternate Company," "L.L.C," "LLC.")	
_{2.} Delaware _{3.}	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. February 10, 2009 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Flori	ida, if prior to registration.) o determine penalty liability)
(See sections 608.501 & 608.502 F.S. t	o determine penalty liability)
7. 13798 NW 4th St., Suite 300	Fig. 3
Sunrise, FL 33325	Control of the contro
(Street Address o	f Principal Office)
8. If limited liability company is a manager-managed c	ompany, check here
9. The name and usual business addresses of the management	ging members or managers are as follows:
Matthew Wukasch 15290 SW 26th S	st. Davie, FL 33326
Robert J.W. Ryan 150 N Michigan A	ve Suite 2100 Chicago, IL 60601
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	nitted.)
11. Nature of business or purposes to be conducted or	promoted in Florida: Process and fulfill,
internet sales orders, inventory management	ent and customer support via telephone.
Marke has	1
	norized representative of a member.
	tion of this document constitutes an affirmation under the . I am aware that any false information submitted in a

Typed or printed name of signee

Matthew Wukasch

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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: Noodlewise, LLC		
If unavailable, t	he alternate to be used in the state of Florida is:	
2. The name ar	nd the Florida street address of the registered agent and office are:	
Matthew Wukasch		
	(Name)	
13798 NW 4th St., Suite 300		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Sunrise, FL 33325 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.

(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

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "NOODLEWISE LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED

SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED

TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE SEVENTEENTH DAY OF FEBRUARY, A.D. 2009, AT 1:29 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "NOODLEWISE LLC".

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

4656504 8310

130100792

AUTHENTICATION: 0177720

DATE: 01-29-13

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