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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

1 (850) 978-5368

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

Email	Address	<u> </u>
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Foreign Limited Liability Company Bakers 2013, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

K.SALY EXAMINER MAR 1 3 2013

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3/12/2013

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bakers 2013, LLC	
	Name of Limited Liability Company
The enclosed "Application by Poreign Limited L Existence, and check are submitted to register th	diability Company for Authorization to Transact Business in Florida," Certificate of a above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this	matter to the following:
	Name of Person
	Firm/Company
	4 Jul = Conspany
	Address
	City/State and Zip Code
	NICoesterer@bfgsfl.com
B-mail address	(to be used for future annual report notification)
For further information concerning this matter, pl	ozeo cull:
	nt ()
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
Registration Section	Registration Section
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassoe, FL 32301
Enclosed is a check for the following amo \$125.00 Filing Fee \$130.00 Filing I Cortificate of St	Fee &\$155,00 Filing Fee &\$160.00 Filing Fee, Certificate

PL657 - 10/05/1010 C T Pling Manager Online

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 10 ONDA:

	MITED CLARECTE CHAPART TO TRANSACT BUSINESS IN THE STATE OF PLORIDA:	
1, 1	Bakers 2013, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LL.C.," or "LLC.")	
con	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wasent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C." "LLC."	riuen Y
7)	Delaware 3. 46-2081101 [Jurisdiction under the law of which foreign limited Hability ompany is organized) (FEI number, if applicable)	
4	5. Perpetual (Date of Organization) 5. Perpetual (Duration: Year limited liability company will coarse to	
	exist or "perpetual")	
б. <u>1</u>	Upon Qualification	
	(Date first transacted business in Florids, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)	بعب
7. 2	2815 Scott Avenue, St. Louis, MO 63103	₩ <u> </u>
		5
٠.	(Stroot Address of Frincipal Office)	- ~
8. I	If limited liability company is a manager-managed company, check here	
9, 7	The name and usual business addresses of the managing members or managers are as follows:	
. 3	Peter Bdison, 2815 Scott Avenue, St. Louis, MO 63103	ジグ
1	Nancy Koesterer, 2815 Scott Avenue, St. Louis, MO 63103	
_	,	
-		
10. A	Attached is an original certificate of existence, no more than 90 days old, duty authenticated by the official having custody of record	sin
	urisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign is no under on the translator must be submitted.)	
	,	
. 1. 1	Nature of business or purposes to be conducted or promoted in Florida:	
. <u>rt</u>	etail shop and accessories atores	
٠,	the Edward	•
	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 population of parjury that the finite stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a filird degree follony as provided for in s.817.155, F.S.)	
	Peter Bdison	
	Typed or printed name of signee	

PLOST - 10/05/2010 C T Fifting Manager Challes

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FURSUANT 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:		
Bakers 2013, 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;		
C T Corporation System		
(Name)		
1200 South Fine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Flantation FL 33324 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.

CT Corporation System

Connie Bryan

(Signature)

Assistant Secretary

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

PLOIF - 10/03/2019 C T Pling Manager Online

Delaware

PAGE 1

The First State

I, JEFFREY N. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BAKERS 2013, 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 SEVENTE DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5292682 8300

130285900

You may verify this certificate caline at corp. dalaware.gov/suthres.shtml

AUTHENTICATION: 0265025

DATE: 03-07-13