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SECRETARY OF STATE
SECRETARY OF STATE

K.SALY EXAMINER JUL 23 2013



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2013

RASHAD BANKS HALF N' HALF WATER ICE LLC 2860 E DUNBAR DR. PHOENIX, AZ 85042

SUBJECT: HALF N' HALF WATER ICE LLC

Ref. Number: W13000040019

We have received your document for HALF N' HALF WATER ICE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 113A00017279

CR2E027 (9/10)

COVER LETTER

TO:

Registration Section Division of Corporations

Half N Half Water Ice 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:

Rashad Banks
Name of Person
Half N Half Water Ice LLC
Firm/Company
2860 E Dunbar Dr
Address
Phoenix AZ 85042
City/State and Zip Code
rashadbbanks@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rashad Banks 561-2080
Name of Person Area Code & Daytime Telephone Number

MAILING ADDRESS: Divis on of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle

Tallahassec, 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 STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGH LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Half N' Half Water Ice LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL.C.")
Half and Half Water Ice LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Philadelphia, $\mathcal{P}A$ 3. 261176022
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. October 17,2007 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
_{6.} July 23,2013
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1059 Collins Ave Unit 206
Miami Beach, FL 33139
(Street Address of Principal Office)
7. 1059 Collins Ave Unit 206 Miami Beach, FL 33139 (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:
Rashad Banks-2860 E dunbar Dr, Phoenix AZ 85042
Rodney Banks-1059 Collins Ave Unit 206, Miami Beach, FL 33139
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 oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Frozeri Treat food services, category food and drink
Signature of a member or an authorized representative of a member.
(In secondance 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 felony as provided for in s.817.155, F.S.)

Rashad Banks
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:
Half n Walf Work ICO
If unavailable, the alternate to be used in the state of Florida is:
Half and Half Wate JCD
2. The name and the Florida street address of the registered agent and office are:
Rashad Banks
(Name)
1059 Collins Ave Unit 206
Florida Street Address (P.O. Box NOT ACCEPTABLE)
MIAMI BEACH FL 33139 City/State/Zip
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.

Rashad Bunks
(Signature)

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

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

JULY 23, 2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Half n Half Water Ice LLC.

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth