M13000005389

(Red	uestor's Name)	
(Add	lress)	
, (Add	iress)	
(City	/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



600250667336

08/15/13--01002--007 **1066.25

TILED

MIN AUG 26 PM 4: 06

SCERETARY OF STATE

SCERETARY OF STATE

W13-45867

AUG 2 7 2013

D. BRUCE



August 23, 2013

Florida Department of State Division of Corporations PO 6327 Tallahassee, FL 32314

Re: Flanders Provision Company LLC W13000045867

To whom it may concern:

In response to the attached notice, I can confirm the principals in both entities in question are the same. Flanders Provision Company LLC (L130001090171) was originally created on Aug 2, 2013 as a FL LLC. It should have been created as a foreign LLC. Recognizing the error, this entity was dissolved on Aug 8, 2013. The new application creating a foreign LLC was the document returned to us by the state. Waycross Investment Company LLC is the member in the dissolved FL LLC and the applied for foreign LLC. Copies of the dissolved Articles of Organization and Dissolution for the FL LLC are attached, along with the foreign LLC application for the new entity.

I am returning the foreign LLC application for processing. Should you have any question please.

Thank you.

Sincerely

Jerry Dodson

VP Finance



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2013

JERRY DODSON 4339 ROOSEVELT BLVD, STE 400 JACKSONVILLE, FL 32210

SUBJECT: FLANDERS PROVISION COMPANY LLC

Ref. Number: W13000045867

We have received your document for FLANDERS PROVISION COMPANY LLC and your check(s) totaling \$1066.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 113A00019669

CR2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FLANDERS PROUISION COMPANY LL 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:
JERRY DODSON Name of Person
HICKORY FOUDS INC
4339 ROUSEWAT BLUD, STE 400
JACKSUNVILLE, FL 32210 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section STREET ADDRESS: Division of Corporations Registration Section
P.O. Box 6327 Clifton Building Tallahassee. FL 32314 2661 Executive Center Circle Tallahassee. FL 32301
Enclosed is a check for the following amount: \$\begin{align*} \text{S125.00 Filing Fee} & \text{S130.00 Filing Fee & } & \text{S155.00 Filing Fee & } & \text{S160.00 Filing Fee, Certificate } & \text{Certified Copy} & \text{of Status & Certified Copy} \end{align*}

• 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 FOREIG	?N
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. TANES PROVISION COMPLETE LACTOR (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	7040
	, 049
(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	1
Company," "L.L.C." "LLC.")	
2. DEL AWALE (Jurisdiction under the law of which foreign limited liability generative) (FEI number, if applicable)	
company is organized)	repr
4. 2007 [(Date of Organization)] [5. PERPETUAL (Duration: Year limited liability company will cease to	
(Date of Organization) (Diffation: 1ear inflied habitity company will cease to exist or "perpetual")	
6. 2010	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	
	E
4339 RUSELETT BLUD STE 400, JAKKSON UNLES (Street Address of Principal Office) 3220	7
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:	
WAY CROSS INVESTMENT COMPANY LICE	
Part of the same o	
4339 ROOSEVELT BLW, STE 400 SEE	o g
JACKSUNVILLE, FL 32210 SER &	C70.0 :
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having costody officials.	in a
the junstiction funder the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign statisticate is	Markey .
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:	
ANY LOWFUL PURPOSE	
Signature of a prember or an authorized representative of a member.	
(In accordance with section 603.408(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.)	
Typed or printed name of signee	
1 ypen 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 Liab	ility Company is: PROUSION COMPANT 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:

WILLIAM H. MORRIS

(Name)

4339 RUSEVAT BLW, STE 4CW
Florida Street Address (P.O. Box NOT ACCEPTABLE)

TOCKSUM UF FL 32240

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 "FLANDERS PROVISION COMPANY, 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 EIGHTH DAY OF AUGUST, A.D. 2013.

2019 AUG 26 PH 4: 06

4342623 8300

130964982

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 0648574

DATE: 08-08-13

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