# M13000005570

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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Certified Copies Certificates of Status		
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31/15/00 OF CORPORATION

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J. SAULSBERRY EXAMINER SEP 5 2013



ACCOUNT NO. : 12000000195				
REFERENCE : 786482 5061889				
AUTHORIZATION: Spelle Reconstruction : \$ 125.00				
COST LIMIT : \$ 125.00				
ORDER DATE : September 4, 2013				
ORDER TIME : 11:51 AM				
ORDER NO. : 786482-005				
CUSTOMER NO: 5061889				
FOREIGN FILINGS				
NAME: BOARDWALK FROZEN TREATS, LLC				
··				
XXXX QUALIFICATION (TYPE: LL) 99 52				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING				
CONTACT DEPCON. Cucio Vnicht EYTH 52956				

EXAMINER:

## 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 HARLITY COMPANY TO TRANSACT RUSINESS, IN THE STATE OF FLORIDA:

1	Boardwalk Frozen Treats, LLC
••	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C." "LLC.")
2.	Delaware 3. 46-2701363
(	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable), company is organized)
4.	May 1, 2013 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	Upon filing of this application
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	3655 Bonita Beach Road, Suite 1
	Bonita Springs, FL 34134
	(Street Address of Principal Office)
	If limited liability company is a manager-managed company, check here   The name and usual business addresses of the managing members or managers are as follows:
9.	$\pm \Xi$ $\sigma$
	See Exhibit A attached hereto.
10	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records
the	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under cath of the translator must be submitted.)
11	Nature of business or purposes to be conducted or promoted in Florida: Seller and marketer of
	packaged ice cream products through retail grocery channels in the US and Canada.
	Duing Occeens
	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 felony as provided for in s.817.155, F.S.)
	David Owens, Member
	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 t	he Limited Liability Company is:	:
Boardwalk Frozer	Treats, LLC	:
lf 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 a	re:
(	Corporation Service Company	2013
_	(Name)	<u> </u>
7	201 Hays Street	1
_	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
<u>ד</u>	allahassee FL 32301	8: <b>52</b>
	City/State/Zip	,11.

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.

Sue G. Knight
Assistant Vice President

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

#### Managers

Name	Address
Thomas Delaplane	3650 Mount Diablo Boulevard
•	Suite 205
	Lafayette, CA 94549
William Eichar	14 Drakes View Circle
	Greenbrae, CA 94904
David Owens	241 Bayfront Drive
	Bonita Springs, FL 34134
Reed Howlett	16 Steeplechase Court
	St. Louis, MO 63131
Mark Martino	c/o Axiom Capital Management, Inc.
	780 Third Avenue, 43rd Floor
	New York, NY 10017
Alan Miller	15303 Pembroke Point
	Naples, FL 34110

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# Delaware

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#### The First State

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

DELAWARE, DO HEREBY CERTIFY "BOARDWALK FROZEN TREATS, 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 FOURTH DAY OF SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BOARDWALK FROZEN TREATS, LLC" WAS FORMED ON THE FIRST DAY OF MAY, A.D. 2013.

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

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Jeffrey W Bullock, Secretary of SI
AUTHENTY CATION: 0708992

DATE: 09-04-13

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