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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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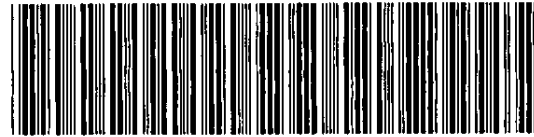
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

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TALLAHASSEE FLORIDA

AUG 27 2014
T. HAMPTON

6805-1109

RUTLEDGE ECENIA

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HAROLD F. X. PURNELL

VIA HAND DELIVERY
MEMORANDUM

TO: Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

FROM: Maggie Schultz

DATE: August 26, 2014

RE: Cork Distributors, LLC
**Resubmission of Application by Foreign Limited Liability Company
For Authorization to Transact Business in Florida
Reference No.: W14000050287**

Attached is the above-referenced amended application submitted on behalf of Cork Distributors, LLC which now includes the company's Certificate of Existence. Also attached is a copy of the Division's rejection letter for your reference. The check in the amount of \$125.00 for the filing fee was retained by your office. We would appreciate it if our messenger can wait to receive confirmation of the filing, but, if not, please contact us when the confirmation is ready for pickup.

Thank you for your assistance. Please call me at 681-6788 if you have any questions.

RUTLEDGE ECENIA

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VIA HAND DELIVERY **MEMORANDUM**

TO: Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

FROM: Maggie M. Schultz

DATE: August 15, 2014

RE: Application by Foreign Limited Liability Company
For Authorization to Transact Business in Florida
Cork Distributors, LLC

Attached is an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, along with a check in the amount of \$125.00 for the Filing Fee and Designation of Registered Agent.

Thank you for your assistance. Please call our office at 681-6788 when the filing confirmation is ready for pickup.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 18, 2014

RUTLEDGE ECENIA
P O BOX 551
TALLAHASSEE, FL 32302-0551

SUBJECT: CORK DISTRIBUTORS, LLC
Ref. Number: W14000050287

We have received your document for CORK DISTRIBUTORS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

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.

Please return 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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 314A00017656

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DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORK DISTRIBUTORS, 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:

JON BRYSON
Name of Person

CORK DISTRIBUTORS, LLC
Firm/Company

601 RIVERSIDE AVE
Address

JACKSONVILLE, FL 32204
City/State and Zip Code

JBRYSON@FNF.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JON BRYSON at (904) 854-8195
Name of Contact 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
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. CORK DISTRIBUTORS, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE 3. 47-1278272
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 60 OCEAN BLVD #11
ATLANTZ BEACH, FL 32233
(Street Address of Principal Office)

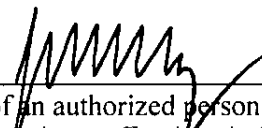
6. 601 RIVERSIDE AVE
JACKSONVILLE, FL 32204
(Mailing Address)

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14 AUG 26 AM 10:21
SECRETARY OF STATE
TALLAHASSEE FLORIDA

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

JOHN BRYSON - OWNER
601 RIVERSIDE AVE
JACKSONVILLE, FL 32233

8. 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)


Signature of an authorized person

(In accordance with section 605.0203, 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.)

JOHN W. BRYSON
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

CORK OSTERBURNS, 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:

JON BAYSON

(Name)

601 RIVERSIDE AVE

Florida Street Address (P.O. Box NOT ACCEPTABLE)

JACKSONVILLE FL 32204

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 605, 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)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORK DISTRIBUTORS, 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 TWENTY-SIXTH DAY OF AUGUST, A.D. 2014.

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



5564467 8300

141109311

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1647895

DATE: 08-26-14