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Division of Corporations Fax Number : (850)617-6383

From:

D. GUERRA Account Name : AKERMAN LLP - FT. LAUDERDALE Account Number : I19980000010 Fhone : (954)463-2700 Fax Number : (954)463-2224

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APPL	ICATION BY FORE	IGN LIMITED L TRANSACT E				HORIZAT	ION TO
IN COMP	LIANCE WITH SECTION	1 605.0902, FLORIDA	A STATUTES TO	HE FOLLOW	ING IS SUB		REYJINTER
FOREIGN	LIMITED LIABBJTY CO.	MPANY TO TRANSA	CT BUSINESS I	NTHE STAT	EOFFLOR	DA.	
1. L'arte	della Casa, LLC	····					
	(Name of Foreign Limited Li	iability Company: must i	include "Limited L	ability Compar	y," "L.L.C.," o	r "LLC.")	
(If name una Liability Cor	vollable, enter alterniste name i ipany," "L.L.C." or "LLC.")	adopted for the purpose	of transacting busin	ess in Florida.	The alternate n	ame must inclue	le "Limited
2. Dela	ware		3. April	ied_for			
(Jurisdictio company	n under the law of which fore is organized)	ign limited liability	+++++++++++++++++++++++++++++++	(FEI nu	mber, it applie	able)	
₄ Upo	n filing with the	e State					
		tions 605.0904 & 605.09	s in Florida, if prior	to registration.) Niter)		
610) Blue Lagoon						
5. 0700				, , , , , , , , , , , , , , , , , , , ,			<u> </u>
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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:

L'arte della Casa, 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:

L'arte della Cucina, LLC

(Name)

6100 Blue Lagoon Dr., Suite 440, Miami, FL 33126

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

Miami

FL FL

33126

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.

Bruce Taylor, CEO		(Signa	ture)
	\$	100.00	Filing Fee for Application
		25.00	Designation of Registered Agent
•	S	30.00	Certified Copy (optional)
	\$	5.00	Certificate of Status (optional)

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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 "L'ARTE DELLA CASA, 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 FIFTEENTH DAY OF OCTOBER, A.D. 2014.

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

AND I DO REREBY FURTHER CERTIFY THAT THE SAID "L'ARTE DELLA CASA, LLC" WAS FORMED ON THE THIRTEENTH DAY OF OCTOBER, A.D. 2014.

5622123 8300

141287675 You may verify this certificate online at corp. delawara.gov/authwer.shtal H14000242545

Jeffrey W. Bullock, Socretary of State TION: 1783316 AUTHENTYCA

DATE: 10-15-14