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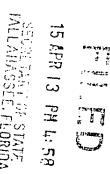
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THE MAN SERVICE

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	CiderElite, LLC		
SODJ.		Name of Limited Liability Company	•
		ciability Company for Authorization to Transact Business in Florida, e above referenced foreign limited liability company to transact business.	
Please	return all correspondence concerning this	matter to the following:	
	Sergio R. Aguilar		
		Name of Person	
	CiderElite, LLC		
		Firm/Company	
	14067 Saint Kitts Dr		
		Address	
	Fort Myers, FL 33905		
		City/State and Zip Code	
	saguilar@ciderelite.com	1	
	E-mail addr	ess: (to be used for future annual report notification)	
For fu	rther information concerning this matter, p	olease call:	
	Sergio R. Aguilar	407 212-6583	
	Name of Contact Person		
	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	
Enclo	sed is a check for the following am ■ \$125.00 Filing Fee Certificate	iling Fee & \$\Bigsim\$ \$155.00 Filing Fee & \$\Bigsim\$ \$160.00 Filing Fee, C	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of Foreign Limited Liability Company; must incider Elite, LLC	clude "Limited Liability Company," "L.L.C	.," or "LLC.")
name unavailable, enter alternate name adopted for the purpose of ability Company," "L.L.C," or "LLC.")	transacting business in Florida. The alterna	ate name must include "Limited
State of Delaware	47-2246218 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if ap	opiicable)
Haven't started transacting business		
(Date first transacted business i (See sections 605.0904 & 605.090	n Florida, if prior to registration.) 5, F.S. to determine penalty liability)	
14067 Saint Kitts Dr		
Fort Myers, FL 33905		
	ss of Principal Office)	Section 2
14067 Saint Kitts Dr		Se w
Fort Myore, El 22005		
FUIL IVIVEIS, FL 33903		_ i i i
Fort Myers, FL 33905	lina Addraga)	
(Mai	ling Address)	Legans S
(Mai The name, title or capacity and address of the per ergio R. Aguilar, Founder/CEO, 14067 Saint M	rson(s) who has/have authority to Kitts Dr, Fort Myers, FL 33905	o manage is/are:
	rson(s) who has/have authority to Kitts Dr, Fort Myers, FL 33905 ts Dr, Fort Myers, FL 33905 more than 90 days old, duly auther law of which it is organized. (o manage is/are: henticated by the official A photocopy is not
. The name, title or capacity and address of the perengio R. Aguilar, Founder/CEO, 14067 Saint Khauna Dobbs, Founder/CCO, 14067 Saint Kit Attached is an original certificate of existence, no aving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, ust be submitted) Signature of accordance with section 605.0203, F.S., the execution of this document co	rson(s) who has/have authority to (itts Dr, Fort Myers, FL 33905 ts Dr, Fort Myers, FL 33905 more than 90 days old, duly authorized person authorized person institutes an affirmation under the penaltics of person in the penaltics of pe	henticated by the official A photocopy is not nder oath of the translate triple that the facts stated herein are
. The name, title or capacity and address of the perergio R. Aguilar, Founder/CEO, 14067 Saint Khauna Dobbs, Founder/CCO, 14067 Saint Kit Attached is an original certificate of existence, no eving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, ust be submitted)	rson(s) who has/have authority to (itts Dr, Fort Myers, FL 33905 ts Dr, Fort Myers, FL 33905 more than 90 days old, duly authorized person authorized person institutes an affirmation under the penaltics of person in the penaltics of pe	henticated by the official A photocopy is not nder oath of the translate triple that the facts stated herein are

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.

The name of the Limited Liability Company is: CiderElite, LLC								
If unavailable Cider Elite,	e, the alternate to be used	in the state of Florida is:						
2. The name	and the Florida street add	dress of the registered agent and office are:	i					
	Sergio R. Aguilar		ALL AI	15 APR	148.44			
		(Name)	- To (2)	70 - 3				
	14067 Saint Kitts De	r		3 PH	. 1922-96 1 1 1 1944-980 2 11 1			
	Florida Stre	eet Address (P.O. Box NOT ACCEPTABLE)	STA.	ار ا	History (Fr			
	Fort Myers	33905 FL	TATE	20				
		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.

Lyo Mayal (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 "CIDERELITE, 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 EIGHTEENTH DAY OF MARCH, A.D. 2015.

15 APR 13 PH L: 58

5624152 8300

150358749

AUTHENTICATION: 2213620

DATE: 03-18-15

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