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TSCHROEPER 4.24.15

COVER LETTER

TO:

Registration Section

Div	ision of Corporation	15					
SUBJECT:	Tipsy Acquisition	ons, LLC					
		Name of Limited Liability Company					
The enclosed Existence, an	d "Application by Fore	eign Limited Liability Cor d to register the above refe	npany for Authoriza erenced foreign limit	tion to Transact Business in Florida ted liability company to transact bus	a," Certificate of siness in Florida.		
Please return	all correspondence c	oncerning this matter to th	ne following:				
	Rita W. Garr	у					
			Name of Person		-		
	Golan & Chr	isie, LLP					
	Firm/Company						
	70 West Madison Street, Suite 1500						
			Address		-		
	Chicago, IL	60602					
		City/:	State and Zip Code		-		
	rwgarry@gola	anchristie.com					
		E-mail address: (to be use	ed for future annual rep	port notification)	_		
For further in	nformation concerning	g this matter, please call:					
Rít	a W. Garry		312 at (696-1366			
	Name of	Contact Person	Area Code	Daytime Telephone Number	_		
Divi Reg P.O.	JLING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314	Division Registr Cliftor 2661 E	ET ADDRESS: on of Corporations ration Section Building Executive Center Cir. assee, FL 32301	cle			
	s a check for the fo 125.00 Filing Fee	Dllowing amount: \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Certified Cop				

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

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

(Nume of Foreign Limited Liability Company; must include "Limited Liability Company,"	L.L.C.," or "LLC.")		
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The ability Company," "L.L.C," or "LLC.")	alternate name must include	"Limited	
Delaware 3 47-3653321			
	ity (FHI number, if applicable)		
April 6, 2015	w. T.		
(Dute first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
294 Flamingo Point North, Jupiter, FL 33458	F.		
		i.	
(Street Address of Principal Office)			
(,			
	इन ७		
	n.		
(Mailing Address) The name, title or canacity and address of the person(s) who has/have author	ity to manage is/are		
. The name, title or capacity and address of the person(s) who has/have author	ity to manage is/are:		
(Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have author SEE ATTACHED LIST OF MANAGERS	ity to manage is/are:	 	
7. The name, title or capacity and address of the person(s) who has/have author	authenticated by the ed. (A photocopy is no	ot	
Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organize eceptable. If the certificate is in a foreign language, a translation of the certificate	authenticated by the ed. (A photocopy is no	ot	
The name, title or capacity and address of the person(s) who has/have author SEE ATTACHED LIST OF MANAGERS Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organize exceptable. If the certificate is in a foreign language, a translation of the certificate	authenticated by the ed. (A photocopy is not under oath of the tr	ot anslato	

Typed or printed name of signee

INSERT

<u>to</u>

Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

Entity Name: Tipsy Acquisitions, LLC

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

Name	Title	Address
Matt Lindahl	Manager	294 N. Flamingo Point, Jupiter, FL 33458
Tuan Nguyen	Manager	294 N. Flamingo Point, Jupiter, FL 33458
Thuy Nguyen	Manager	294 N. Flamingo Point, Jupiter, FL 33458
Beth Nguyen	Manager	294 N. Flamingo Point, Jupiter, FL 33458
Thanh Nguyen	Manager	294 N. Flamingo Point, Jupiter, FL 33458



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.

	ne of the Limited Liability uisitions, LLC	Company is:		
If unavailab	ole, the alternate to be used	in the state of Florida is:		
2. The nam	e and the Florida street ad	dress of the registered agent and o	ffice are:	
	NRAI Services, Inc			
		(Name)		
	1200 S. Pine Island Road			
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE		
	Plantation	33324		
	· · · · · · · · · · · · · · · · · · ·	City/State/Zip	To B	
liability com registered ag statutes relat	pany at the place designate zent and agree to act in this ting to the proper and comp	and to accept service of process for the accept service of process for an interest accept acc	or the above stated limited by the appointment as ly with the provisions of all I am familiar with and	
	\$ 10 \$ 2			

Certificate of Status (optional)

5.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "TIPSY ACQUISITIONS, 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 TENTH DAY OF APRIL, A.D. 2015.

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

5724249 8300

150494850

AUTHENT CATION: 2280611

DATE: 04-10-15

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