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COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT: _

Frey Farms Holdings, 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:

	Sarah Talley							
		N	ame of Person				-	
	Frey Farms Holdings, LLC							
	Firm/Company							
	111 County Hwy 15							
	Address					-		
	Keenes, IL 62851							
	City/State and Zip Code					-		
	Janschwartz@fre	eyfarms.com				1		
		E-mail address: (to be use	d for future annual	report not	ification)	A Rec	2015	
For further in	formation concernin	g this matter, please call:				AHA	JU	
Jan	Schwartz, Controlle	r	618 at (835-25	36	SSTE	29	rn rn
	Name c	of Contact Person	Area Code	Day	time Telephone	Number	-υ	$\overline{\mathbf{O}}$
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B	ADDRESS: of Corporations on Section uilding cutive Center Ci	ORIDA ORIDA	1:10	-	
Tan	111135CC, 1 E 52514				ee, FL 32301			
	check for the follow 125.00 Filing Fee	ing amount: □\$130.00 Filing Fee &	🗆 \$155.00 Filin	g Fee &	🗖 \$160.00 Fili	ing Fee (Certifics	ate
		Certificate of Status	Certified Copy		of Status & Ce	-		

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:

1.	Frey	Farms	Holdings,	LLC
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. .

- 1		nclude "Limited Liability Company." "L.L.C.," or '	
(If name unavailable, enter al Liability Company," "L.L.C,		f transacting business in Florida. The alternate nam	e must include "Limite
2. Illinois		3. 37-1416217	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			
	(Date first transacted business i (See sections 605.0904 & 605.090	in Florida, if prior to registration.) 05, F.S. to determine penalty liability)	-
5. 111 County Hwy 15, 8	Suite A		-
Keenes, IL 32851			
··	(Street Address of Prin	cipal Office)	-
6. 111 County Hwy 15, S	uite A		_
Keenes, IL 62851			
	(Mailing Add	lress)	-
7. Name and street addres	s of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	A.
Name:	Sarah Talley		
Office Address:	4275 North Road		2015 JUL 29 SECRETARY ALLAHASSE
	Naples	Florida 34104	2 q SSEE
Registered agent's accep	(City)	(Zip code)	

Having been named as registered agent and to accept service of process for the above stated corporation at he place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

<u>Liney Talley</u> (Rygistered ageny's signature)

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

Sarah Talley, Manager, 111 County Hwy 15, Keenes, IL

John Frey, Director 111 County Hwy 15, Keenes, IL

9. Attached is a 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. (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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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	Frey
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To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

FREY FARMS HOLDINGS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 01, 2001, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 24TH

day of JULY A.D. 2015

Authentication #: 1520501166 verifiable until 07/24/2016 Authenticate at: http://www.cyberdriveillinois.com

esse White

SECRETARY OF STATE