

11/6000002253

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Wile-18314 NOT Avail

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FILED  
2016 MAR 10 AM 7:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
16 MAR 10 PM 4:40

K. SALY  
EXAMINER  
MAR 18

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 051158 8068885

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : March 9, 2016

ORDER TIME : 3:57 PM

ORDER NO. : 051158-005

CUSTOMER NO: 8068885

FOREIGN FILINGS

NAME: AMERICAN NUTRACEUTICALS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

051158



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 11, 2016

CSC / COURTNEY WILLIAMS

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: AMERICAN NUTRACEUTICALS LLC  
Ref. Number: W16000018314

We have received your document for AMERICAN NUTRACEUTICALS LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P05000144613 "AMERICAN NUTRACEUTICAL CORP.".

Please return your document, along with 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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 816A00005057

RECEIVED  
16 MAR 17 PM 12:08  
SUNSHINE  
DIVISION OF CORPORATIONS

**COVER LETTER**

**TO:     Registration Section  
          Division of Corporations**

**SUBJECT:     AMERICAN NUTRACEUTICALS 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:

ADAM LUSTHAUS, ESQ.

\_\_\_\_\_  
Name of Person

The Law Office of Adam Lusthaus, PLLC

\_\_\_\_\_  
Firm/Company

370 Camino Gardens Blvd., Suite 343

\_\_\_\_\_  
Address

Boca Raton, FL 33432

\_\_\_\_\_  
City/State and Zip Code

adam@adamllaw.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karl Jebailey

561

400-0924

at (     )     )

\_\_\_\_\_  
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 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. AMERICAN NUTRACEUTICALS LLC

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

AMERICAN NUTRACEUTICALS (DE) 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. Michigan

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-0852219

(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. 4800 North Federal Highway, A302

Boca Raton, FL 33431

(Street Address of Principal Office)

6. \_\_\_\_\_

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

Registered agent's acceptance:

*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 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.*

Corporation Service Company

By: \_\_\_\_\_

(Registered agent's signature)

**Courtney Williams**  
**Asst. Vice President**

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

Karl Jebailey, Member

4800 North Federal Highway, A302

Boca Raton, FL 33431

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)

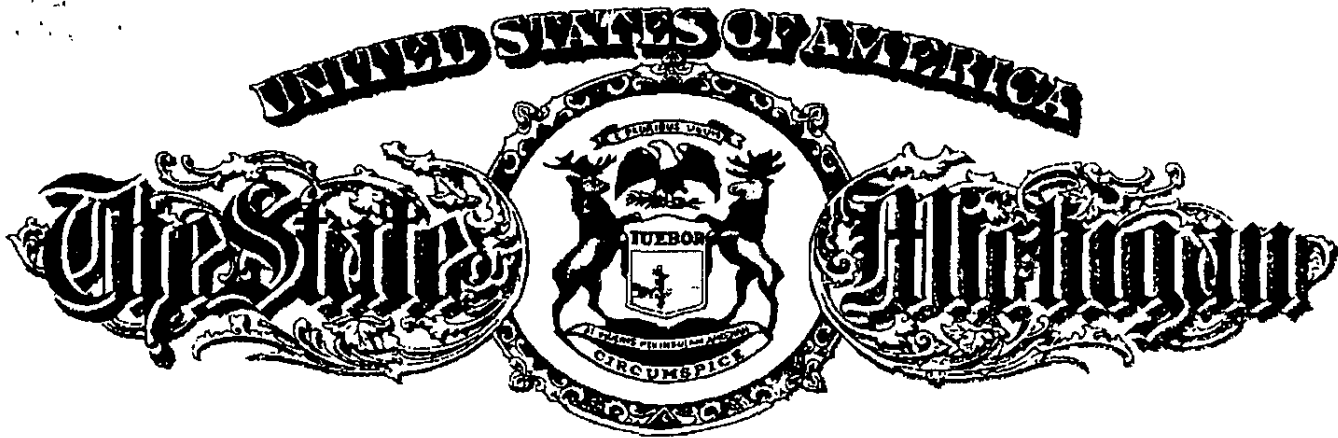
\_\_\_\_\_  
Signature of an authorized person

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.

Adam Lusthaus

Typed or printed name of signee

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2016 MAR 10 AM 7:58  
DEPARTMENT OF STATE  
HALL OF RECORDS  
TALLAHASSEE, FLORIDA



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

**AMERICAN NUTRACEUTICALS LLC**

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2016 MAR 10 AM 1:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

was validly organized on December 1, 2015 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission  
1373568

In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 10th day of March, 2016

*Julia Dale*

Julia Dale, Acting Director  
Corporations, Securities & Commercial Licensing Bureau