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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007

Phone

: (702)866-2500

Fax Number

: (702)866~2689

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

11111

Foreign Limited Liability Company Cariloha, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
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COVER LETTER

| | tration Section ion of Corporatio | ns | | | | |
|---|---|--|--|--|---|-------------------|
| SUBJECT: | CARILOHA, LLC | | | | • | |
| _ | | Name of | Limited Liability | Company | , , , , , , , , , , , , , , , , , , , | |
| The enclosed " Existence, and | Application by Fo | oreign Limited Liability Comp ed to register the above refer | pany for Authoriza enced foreign limi | ation to Transact Busted liability company | siness in Florida," Certificate o y to transact business in Florid | of a. |
| Please return a | II correspondence | concerning this matter to the | following: | , | | |
| • | Wendy Hefley | | | | | |
| | | N | ame of Person | | | |
| | InCorp Servic | es, Inc. | · | | | |
| Firm/Company | | | | | | |
| 3773 Howard Hughes Parkway, Suite 5000S | | | | | | |
| | | | Address | | | |
| | Las Vegas, N | V 89169 | • | | | |
| | | City/S | tate and Zip Code | | | |
| | managedreports | @incorp.com | | | 722.5 | Ť |
| | | E-mail address: (to be use | d for future annual | report notification) | TIL PU | ة زيس تراجع |
| For further info | rmation concerni | ng this matter, please call: | | | | g ve |
| Wend | ly Hefley on beha | If of InCorp Services, Inc. | . 800 at (| 246-2677 | | ا سام سخت |
| | Name | of Contact Person | Area Code | Daytime Tele | phone Number 📯 | |
| Divisi Regist P.O. E | JNG ADDRESS on of Corporation ration Section lox 6327 assee, FL 32314 | | | STREET ADDRE Division of Corpor Registration Sectio Clifton Building 2661 Executive Ce Tallahassee, FL 32 | ations n nter Circle | |
| Enclosed is a cl ☐ \$12 | heck for the follow 5.00 Filing Fee | ving amount: \$\Bigcip \text{\$130.00 Filing Fee & Certificate of Status} | ■ \$155,00 Filin | _ | .00 Filing Fee, Certificate s & Certified Copy | |

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

| COMPANY TO TRANSACT BU | TION 815.0302, FLORIDA STATUTES, THE FC ISINESS IN THE STATE OF FLORIDA: | | |
|--|---|--|---|
| I. CARILOHA, LLC | ign Limited Liability Company; must include | Limited Liability Company," "L.L.C.," | or "LLC.") |
| (If name unavailable, enter al Liability Company," "L.L.C, | ternate name adopted for the purpose of trans | acting business in Florida. The alternate | name must include "Limited |
| 2. Utah | 3 | 37-1611680 | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, if applica | ble) |
| 4 Upon Registration | | • | |
| | (Date first transacted business in Flor (See sections 605.0904 & 605.0905, F. | rida, if prior to registration.) S. to determine penalty liability) | |
| 5. 280 West 10200 South | · | | · |
| Sandy, UT 84070 | • | | _ |
| 280 West 10200 South | (Street Address of Principal | Office) | |
| Sandy, UT 84070 | | | |
| | (Mailing Address) | | |
| 7. Name and street addres | s of Florida registered agent: (P.O. Box | NOT acceptable) | inica D |
| Name: | InCorp Services, Inc. | | |
| Office Address: | 17888 67th Court North | | The state of |
| | Loxahatchee | . Florida 33470 | _ |
| | (City) | (Zip code) | |
| designated in this applica- to complywith the provision | gistered agent and to accept service of priction, I hereby accept the appointment as one of all statutes relative to the proper any position as registered agent. | registered agent and agree to act in ind complete performance of my dui | this capacity. I further agree |
| | (Registered agen | t's signature) | |
| 8. The name, title or caps | city and address of the person(s) who has | have authority to manage is/are: | • |
| Jefferson Pedersen / Mana | ger 280 West 10200 South, Sandy, U | T 84070 | · |
| | | | |
| | | | |
| 9. Attached is a certificate jurisdiction under the law of the translator must be su | of existence, no more than 90 days old, dof which it is organized. (If the certificate bimitted) Signature of an aut | is in a foreign language, a translation | ng custody of records in the 1 of the certificate under oath |
| This document is executed submitted in a document to | in accordance with section 605.0203 (1) the Department of State constitutes a thir | (b), Florida Statutes. I am aware that d degree felony as provided for in a f | any false information 117.155, F.S. |
| | Jefferson Pedersen | - | · |

Typed or printed name of signee



Utah Department of Commerce

Division of Corporations & Commercial Code
160 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, UT 84114-6705
Service Center; (801) 530-4849
Toll Free: (877) 526-3994 Utah Residents
Fax: (801) 530-6438
Web Site: http://www.commerce.utah.gov

05/04/2016 7771157-016005042016-1316600

CERTIFICATE OF EXISTENCE

Registration Number:

Business Name: Registered Date:

Entity Type: Current Status: 7771157-0160

CARILOHA, LLC

August 30, 2010 LLC - Domestic

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Harry Bery

Kathy Berg Director

Division of Corporations and Commercial Code