

M160000005136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

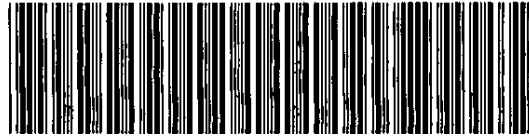
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 JUN 27 PM 4:36
TALLAHASSEE, FLORIDA

JUN 27 2016

Y SULKER

W16-42915



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2016

TY CHERRY
4360 OAKES ROAD SUITE 609
DAVIE, FL 33314

SUBJECT: INNOCENT CHOCOLATE PRODUCTS, LLC
Ref. Number: W16000042915

Updated

2016 JUN 27 AM 2:43
TALLAHASSEE, FLORIDA

We have received your document for INNOCENT CHOCOLATE PRODUCTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

✓ You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 116A00012429

*Completed June 20, 2016
ty cherry mm01mk*

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INNOCENT CHOCOLATE PRODUCTS, 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:

TY CHERRY

Name of Person

INNOCENT CHOCOLATE PRODUCTS

Firm/Company

4360 OAKES ROAD SUITE 609

Address

DAVIE, FL 33314

City/State and Zip Code

TY@INNOCENTCHOCOLATE.COM

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

For further information concerning this matter, please call:

TY CHERRY

561

542-9977

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. INNOCENT CHOCOLATE PRODUCTS, LLC

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

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

3. 47-5002379

(FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4360 OAKES ROAD SUITE 609

DAVIE, FL 33314

(Street Address of Principal Office)

6. 4360 OAKES ROAD SUITE 609

DAVIE, FL 33314

(Mailing Address)

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

Name: TY CHERRY

Office Address: 4360 OAKES ROAD SUITE 609

DAVIE

(City)

, Florida 33314

(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.

(Registered agent's signature)

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

TY CHERRY 821 SW 12 PLACE, FORT LAUDERDALE, FL 33315

MRB/MGR

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.

TY CHERRY

Typed or printed name of signer

STATE OF WYOMING
Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

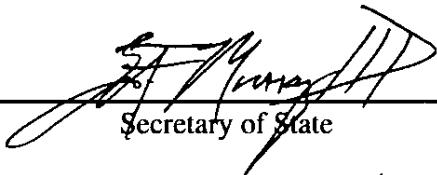
Innocent Chocolate Products, LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on September 5, 2014, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2014-000671349.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 1st day of June, 2016 at 10:10 AM. This certificate is assigned 020284327.




Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <http://wyobiz.wy.gov> and following the instructions displayed under Validate Certificate.