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SOFFEENING PERSONS

FRATHMAT OF SUR

SECRETARY OF STA

K. SALY EXAMINER JUL 20 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 219095 5157078

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: July 18, 2016

ORDER TIME : 3:52 PM

ORDER NO. : 219095-010

CUSTOMER NO: 5157078

FOREIGN FILINGS

NAME: MIAMI PRODUCE CENTER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

Div	ision of Corporatio					
SUBJECT:	Miami Produce Ce	-				
		Name of	Limited Liability	Company		
					ansact Business in Florida," Certifica y company to transact business in Flo	
Please return	all correspondence	concerning this matter to the	following:			
	Robert S. Wa	nnett				
		N	ame of Person	<u> </u>		
	UIA Manage	ment, LLC				
		F	imn/Company		· · · · · · · · · · · · · · · · · · ·	
	1111 Lincoln	Road, Suite #760				
			Address	· · ·	· · · · · · · · · · · · · · · · · · ·	
	Miami Beach	,FL 33139				
••		City/S	tate and Zip Code		````	
	slopez@uiamai	nagement.com				
		E-mail address: (to be use	d for future annua	report not	tification)	
For further in	formation concernin	g this matter, please call:				
Su	set Lopez		305	401-42		
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding centive Center Circle ce, FL 32301	
Enclosed is a	check for the follow	ing amount:				
	125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	g Fee &	☐ \$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 608,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Miami Produce Center, 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.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 1111 Lincoln Road, Suite 760 Miami Beach, FL 33139 (Street Address of Principal Office) 1111 Lincoln Road, Suite 760 Miami Beach, FL 33139 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee , Florida 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 complywith 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. Melissa Zender Asst. Vice President (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: UIA Management, LLC, Manager, 1111 Lincoln Road, Suite 760, Miami Beach, FL 33139

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.

Robert S. Wennett, Authorized Person

Typed or printed name of signee

Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "MIAMI PRODUCE CENTER, 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 EIGHTEENTH DAY OF JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIAMI PRODUCE CENTER, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

2016 JUL 19 AM 6: 09
SEURETARY OF STATE



Authentication: 202674577

Date: 07-18-16

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