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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 1, 2017

GEORGE MCLAUGHLIN II 4820 PROVINCE LINE RD PRINCETON, NJ 08540

SUBJECT: FLORSANI (USA) LLC Ref. Number: W17000009332

We have received your document for FLORSANI (USA) 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Octavia I Simmons Regulatory Specialist II

Letter Number: 817A 00002070

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July Sudi Josephan Sudi Joseph

Division of Corporations 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: 4820 Resvince Line City/State and Zip Code um @ spedopal. Vet E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Daytime Telephone Number STREET ADDRESS: **MAILING ADDRESS:** Division of Corporations Division of Corporations Registration Section Registration Section P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed if a check for the following amount: □ \$130.00 Filing Fee & □ \$160.00 Filing Fee, Certificate ■ \$125.00 Filing Fee ☐ \$155.00 Filing Fee &

Certified Copy

of Status & Certified Copy

COVER LETTER

Florsoni

Certificate of Status

TO:

Registration Section

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

COMPANY TO TRANSACT E	ICTION 503.0902, FILORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTE BUSINESS INTHE STATE OF FLORIDA:	R A FOREIGN LIMITED LIABILITY
1. + lorsa (Name of Fo	reign Limited Liability Company; must include "Limited Liability Company," "L.L.C.	," or "LLC.")
(If name unavailable, enter Liability Company," "L.L.C	alternate name adopted for the purpose of transacting business in Florida. The alternate C," or "LLC.")	e name must include "Limited
2. State of (Jurisdiction under the law company is organized)	w of which foreign limited liability 3. ETN 81-17 (FEI number, if applied)	99150 able)
4		···
5. 4820 R	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
Ringo	on N.J. 08540	7 1188 220
« 4820 ⁷	PCOVINGE LINE ROAD	
Princes	on N.J. 08542	9,2
	(Mailing Address)	
7. Name and street addre	ess of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	Fichous 20	νς, CO
Office Address:	2510 Jaisin Dr.	
	Weston, Florida & S	3371
Registered agent's acce	(City) (Zip code)
Having been named as i designated in this applic to complywith the provis	registered agent and to accept service of process for the above stated limited vation, I hereby accept the appointment as registered agent and agree to act i sions of all statutes relative to the proper and complete performance of my difference	n this capacity. I further agree
×		
P	(Registered agent's signature)	
	pacity and address of the person(s) who has/have appropriate to manage is/are:	
	te of existence, no more than 90 days old, duly authenticated by the official have wof which it is organized. (If the certificate is in a foreign language, a translation submitted)	
	Signature of an authorized person	
This document is execute	ed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that	at any false information

Typed or printed name of signec

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FLORSANI (USA) 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 EIGHTH DAY OF FEBRUARY, A.D. 2017.

6247770 8300

SR# 20170731308

Authentication: 202007878

Date: 02-08-17

You may verify this certificate online at corp.delaware.gov/authver.shtml