## M1700007110

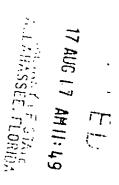
| (Re                     | questor's Name)   |           |
|-------------------------|-------------------|-----------|
| (Ad                     | dress)            |           |
| (Ad                     | dress)            |           |
| (Cit                    | y/State/Zip/Phone | e #)      |
| PICK-UP                 | MAIT              | MAIL      |
| (Bu                     | siness Entity Nan | ne)       |
| (Do                     | cument Number)    |           |
| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
|                         |                   |           |
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| W17-                    | - 580             | 043       |

Office Use Only



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July 13, 2017

KATE PONDER 18848 SWEET GUM CT JUPITER, FL 33458

SUBJECT: PREP MY PLATE KATE, LLC

Ref. Number: W17000058043

We have received your document for PREP MY PLATE KATE, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 617A00014208

8/14/17

Dear Yasemin

The Floor address of the Registered agent.

The Please CALL He if you need anything else
Thous you,

Kare Pondar

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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

|   |   | ed Liability Company, ""[LL.C.," or "LLC.   |  |
|---|---|---|--|
| FURIDA  (Jurisdiction unkler the law of which forest  | go lumited liability company is organized)  | 3 82 - 1709 s   | mber, if applicable)   |
| (D)   | ute first transacted business in Florida, if prior to<br>be sections (4)5 0904 & (4)5 (9005, F.S. to determ   | pregistrition: )  |  |
| 18848 Sweet   |   |   | et Gwn Ct  |
| Jupiter FL 3  |   | 6. 18848 Swe<br>Supiter F   | 2 33458  |
| Name and street address of Fl   | orida registered agent: (P.O. Box   | x <u>NOT</u> acceptable)  |  |
| Name:   | Kate Pander   |   |  |
| Office Address: <u>18</u>   | 1848 Sweet Gum  | Ct.   |  |
| ~   | 1100tes F1 2211   | 58 , Florida 334  | <b>.cs</b>   |
| wing been named as registere<br>signated in this application, I<br>comply with the provisions of  | (Cny)  ed agent and to accept service of hereby accept the appointment a fall statutes relative to the proper   | process for the above stated limite<br>is registered agent and agree to ac<br>r and complete performance of my  | ode)  I d liability company at the place of in this capacity. I further ago  |
| signated in this application, I comply with the provisions of d accept the obligations of my  The name, title or capacity ar  | ed agent and to accept service of hereby accept the appointment of all statutes relative to the proper y position as registered agent.  (Registered agent's and address of the person(s) who have   | process for the above stated limite as registered agent and agree to ac r and complete performance of my signature) as/have authority to manage is/are: | ed liability company at the place in this capacity. I further agree duties, and I am familiar with   |
| wing heen named as registere signated in this application, I comply with the provisions of a accept the obligations of my.  The name, title or capacity at Title or Capacity: | ed agent and to accept service of hereby accept the appointment of all statutes relative to the proper y position as registered agent.  (Registered agent and address of the person(s) who have and Address:  | (Zip control process for the above stated limite as registered agent and agree to act and complete performance of my signature)                         | ed liability company at the place<br>of in this capacity. I further ago<br>by duties, and I am familiar with   |
| wing heen named as registere signated in this application, I comply with the provisions of a accept the obligations of my.  The name, title or capacity at Title or Capacity: | ed agent and to accept service of hereby accept the appointment of all statutes relative to the proper y position as registered agent.  (Registered agent's and address of the person(s) who have   | process for the above stated limite as registered agent and agree to ac r and complete performance of my signature) as/have authority to manage is/are: | ed liability company at the place<br>of in this capacity. I further agree duties, and I am familiar with   |
| rying heen named as registere signated in this application, I comply with the provisions of a accept the obligations of my  The name, title or capacity at Title or Capacity: | d agent and to accept service of hereby accept the appointment of all statutes relative to the proper y position as registered agent.  (Registered agent's and address of the person(s) who have and Address:  Kate Powder  Sweet Gunch               | process for the above stated limite as registered agent and agree to ac r and complete performance of my signature) as/have authority to manage is/are: | ed liability company at the place in this capacity. I further agree duties, and I am familiar with   |
| rying heen named as registere signated in this application, I comply with the provisions of a accept the obligations of my  The name, title or capacity at Title or Capacity: | d agent and to accept service of hereby accept the appointment of all statutes relative to the proper y position as registered agent.  (Registered agent's and address of the person(s) who have and Address:  Kate Powder  Sweet Gunch               | process for the above stated limite as registered agent and agree to ac r and complete performance of my signature) as/have authority to manage is/are: | ed liability company at the place<br>of in this capacity. I further ago<br>y duties, and I am familiar with  |
| The name, title or capacity at Title or Capacity:  Testilent - CEO  MG R  Attached is a certificate of existence of the capacity at the attachments if necessary)             | ed agent and to accept service of hereby accept the appointment of all statutes relative to the property position as registered agent.  (Registered agent) and address of the person(s) who have and Address:  Kate Power Sweet Gwach Tupiter Fu3345. | process for the above stated limite as registered agent and agree to ac r and complete performance of my signature) as/have authority to manage is/are: | Name and Address  Name and Add |

Typed or printed name of sumee





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

DELAWARE, DO HEREBY CERTIFY "PREP MY PLATE KATE, 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 TWENTY-SEVENTH DAY OF JUNE, A.D. 2017.

Authentication: 202786845

Date: 06-27-17