

M1800005862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

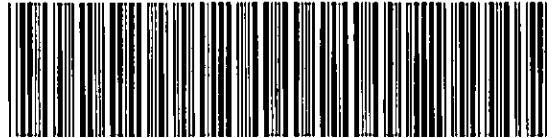
(Document Number)

Certified Copies _____ Certificates of Status _____

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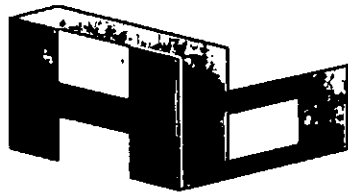


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FILED
18 JUN 12 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. SIMMONS
JUN 22 2018



HOPE
BEVERAGE LLC

Alain P. Huppe
LLC MANAGER
Hope Beverage LLC
484 West St.
West Bridgewater, MA 02379
Mobile: 339-364-1458
compliance@hopebeverage.net

June 7, 2018

Via Fed Ex
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

**Re: Written Consent To Adopt Alternate Name "Hope Beverage LLC Of Florida," A Company
Affiliated With Foreign Company Hope Beverage LLC (EIN 27-3401631), A South
Carolina LLC**

To Whom It May Concern:

I write to note that we incorrectly filed for an LLC online. We were unaware that foreign LLCs must submit paper documentation when registering in Florida. Therefore, to file for foreign qualification in Florida, we submit a current Certificate of Existence from the LLC's State of Incorporation (to wit, South Carolina), a Written Consent to Adopt Alternate Name For Use in the State of Florida, and an Application by Foreign LLC for Authorization to Transact Business in Florida.

We hereby relinquish our prior registration in Florida under document number L18000136525 (corporate filing number 700314075817), and seek to do business in Florida as "**Hope Beverage LLC of Florida**," a company affiliated with Hope Beverage LLC, which should both fall under FEIN 27-3401631.

Best Regards,

Alain P. Huppe

LLC MANAGER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Hope Beverage 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:

Adrian Ezra Grant (compliance)
Name of Person
Hope Beverage LLC
Firm/Company
484 West St.
Address
West Bridgewater/MA 02379
City/State and Zip Code
compliance@hopebeverage.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alain P. Huppe (ahuppe@hopebeverage.net) 339 364 - 1458
 _____ 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. Hope Beverage LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- Hope Beverage LLC of Florida
(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. South Carolina
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 27-3401631
(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. 377 Rubin Ctr Drive
(Street Address of Principal Office)
Suite 201
Fort Mill, SC 29708
6. 484 West St
(Mailing Address)
West Bridgewater, MA
02379

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

Name: Theresa O'Brien

Office Address: 47 S Hamilton Springs Road

St. Augustine

(City)

Florida 32084

(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.

Theresa O'Brien

(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

LLC Manager

Alain P. Huppe

41 William Kellev Rd
Stoughton, MA 02072

(Use attachments if necessary)

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)

10. 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.

Alain P. Huppe

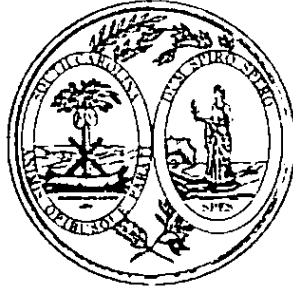
Signature of an authorized person

Alain P. Huppe

Typed or printed name of signee

FILED
JUN 12 AM 11:30
TALLAHASSEE, FLORIDA

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

HOPE BEVERAGE LLC,
a limited liability company duly organized under the laws of the State of South Carolina on September 2nd, 2010, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal
of the State of South Carolina this 16th day
of May, 2018.

A handwritten signature in cursive script that reads "Mark Hammond".
Mark Hammond, Secretary of State