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| (Requestor's Name)                      |                   |           |  |  |  |  |  |
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| (Address)                               |                   |           |  |  |  |  |  |
| (Address)                               |                   |           |  |  |  |  |  |
| (Cit                                    | y/State/Zip/Phone | #)        |  |  |  |  |  |
| PICK-UP                                 | WAIT              | MAIL      |  |  |  |  |  |
| (Bu                                     | siness Entity Nam | ne)       |  |  |  |  |  |
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18 AUG TO AM 9: 04 SECRETARY OF STATE SECRETARY OF STATE

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~ CIMMONS AUG 1 3 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 340602 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: August 9, 2018 ORDER TIME : 8:58 AM ORDER NO. : 340602-015 CUSTOMER NO: 7797493 FOREIGN FILINGS NAME: SOUTHERN GLAZER'S DISTRIBUTORS OF OHIO, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Emily Croft -- EXT# 62925

## COVER LETTER

TO:

| TO:                | Registration Section<br>Division of Corporations   |  |  |  |  |  |
|--------------------|--|--|--|--|--|--|
| SUBJE              | Southern Glazer's Distributors of Ohio, LLC  |  |  |  |  |  |
| SUDJE              | Name of Limited Liability Company  |  |  |  |  |  |
| The end<br>Existen | osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |  |  |  |  |  |
| Please             | turn all correspondence concerning this matter to the following:   |  |  |  |  |  |
|                    | Alan N. Greenspan  |  |  |  |  |  |
|                    | Name of Person   |  |  |  |  |  |
|                    | Southern Glazer's Wine and Spirits, LLC  |  |  |  |  |  |
| Firm/Company       |  |  |  |  |  |  |
|                    | 14911 Quorum Dr., Suite 150  |  |  |  |  |  |
| Address            |  |  |  |  |  |  |
|                    | Dallas, TX 75254   |  |  |  |  |  |
|                    | City/State and Zip Code  |  |  |  |  |  |
|                    | alan.greenspan@sgws.com  |  |  |  |  |  |
|                    | E-mail address: (to be used for future annual report notification)   |  |  |  |  |  |
| For fur            | er information concerning this matter, please call:  |  |  |  |  |  |
|                    | Alan Greenspan 972 392-8333 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       |  |  |  |  |  |
| Enclos             | I is a check for the following amount:  S125.00 Filing Fee   |  |  |  |  |  |

## 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.    | Southern Glazer's Distr                             | ibutors of Ohio, LLC  |                                    |  | - <u></u> -                          |
|-------|---|---|------------------------------------|--|--------------------------------------|
|       | (Name of Foreign                                    | Limited Liability Company; must include "Li   | miled Liabii                       | ity Company," "L.L.C.," or "LLC.")       |                                      |
| (lf r | name unavailable, enter alternate n                 | sine adopted for the purpose of transacting business in   | n Florida. The                     | alternate name must include "Limited Lia | bility Company," "L.L.C," or "LLC,") |
| 2 (   | Ohio  |   | 3                                  | l.                                       | <del>6</del>                         |
| ~     | (Jurisdiction under the law of w                    | hich foreign limited liability company is organized)  | _                                  | (FEI num                                 | per, if applicable                   |
| 4     | Upon Filing   |   |                                    |  | d Spirits U.O.                       |
|       |   | (Date first transacted business in Florida, if pro<br>(See sections 605.0904 & 605.0905, F.S. to de | or to registrati<br>termine penalt | on.)<br>y liability)                     | 一一一一                                 |
| 5     | Southern Glazer's Dist                              |   | 6                                  | Southern Glazer's Wine an                | d Spirits, LEG 🥋 📜 🔾                 |
| •     | (Street Address of I<br>655 Metro Place South       |   |                                    | (Mailing Add                             | ress) 7 (7 (0)                       |
|       |   | , suite 800   |                                    |  |                                      |
|       | Dublin, OH 43017                                    | <del></del>   |                                    | Miami FL, 33169                          |                                      |
| 7     | Name and street address                             | ss of Florida registered agent: (P.O. I   | Ray NOT                            | 'accentable)                             |                                      |
| ,.    | tranic and spect address                            |   | 50x <u>1101</u>                    | _deceptaole;                             |                                      |
|       | Name:   | Corporation Service Company   |                                    |  |                                      |
|       | Office Address:                                     | 1201 Hays Street  |                                    |  |                                      |
|       |   | Tallahassee   |                                    | , Florida <u>32301</u>                   |                                      |
| _     |   | (City)  |                                    | (Zip cod                                 | le)                                  |
|       | gistered agent's accep                              | tance:<br>gistered agent and to accept service  | of proces                          | e for the above stated limited           | l liability common at the place      |
|       |   | tion, I hereby accept the appointmen  |                                    |  |                                      |
|       |   | ions of all statutes relative to the pro  | per and c                          | omplete performance of my                | duties, and I am familiar with       |
| an    | d accept the obligation                             | s of my position as registered agent.  Corporation Service Company                                  | 0                                  | 1004                                     | F ' A 6                              |
|       |   | By:   | <u>Em</u>                          | ly (roff                                 | Emily Croft                          |
|       |   | (Registered ag  | ent's signature                    | , )                                      | Asst. Vice President                 |
| 8.    | - · · · · · · · · · · · · · · · · · · ·             | acity and address of the person(s) who  |                                    |  |                                      |
|       | Title or Capacity:                                  | Name and Address:   | -                                  | fitle or Capacity:                       | Name and Address:                    |
|       | Manager   | Southern Glazer's Wine and Spin   | its, LLC                           |  |                                      |
|       |   | 1600 NW 163rd<br>Miami, FL 33169  | <del></del>                        |  | <del></del>                          |
|       |   |   |                                    |  |                                      |
|       |   |   |                                    |  |                                      |
|       |   |   |                                    |  | #73-A-#-17                           |
| ,,    |   | · · · · · · · · · · · · · · · · · · ·   |                                    |  | 1                                    |
| (L    | Jse attachments if neces                            | sary)   |                                    |  |                                      |
|       |   | of existence, no more than 90 days of   |                                    |  |                                      |
| _     | isdiction under the law<br>the translator must be s | of which it is organized. (If the certif  | icate is in                        | a foreign language, a translat           | non of the certificate under oath    |
| ٠.    |   |   |                                    |  |                                      |
|       |   | uted in accordance with section 605.0   |                                    |  |                                      |
| su    | omutted in a document to                            | o the Department of State constitutes   |                                    |  | S.817.133, F.S.                      |
|       |   |   | w                                  | horize person                            |                                      |
|       |   | Sign  | THE PER PER                        | неки евирална                            |                                      |
|       |   | Steven Becker   | $\cup$                             |  |                                      |

Typed or printed name of signee

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SOUTHERN GLAZER'S DISTRIBUTORS OF OHIO, LLC, an Ohio For Profit Limited Liability Company, Registration Number 1062536, was organized within the State of Ohio on February 17, 1999, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 10th day of August, A.D. 2018.

**Ohio Secretary of State** 

for Hastel

Validation Number: 201822201960