

# M/9000000875

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H19000027874 3)))



H190000278743ABC5

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.  
Account Number : 120150000017  
Phone : (855) 498-5500  
Fax Number : (800) 432-3622

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please\*\***

Email Address: \_\_\_\_\_

FILED  
19 JAN 23 AM 9:55  
ALLIANCE FLORIDA

Foreign Limited Liability Company  
HONEY SMOKED FISH HOLDINGS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

DEC 25 2019

A. LUNT

2019 JAN 23 11:09:23

# 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. Honey Smoked Fish Holdings, 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

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FBI number, if applicable)

4. 1/31/19

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 21151 E. 31st Cir.

(Street Address of Principal Office)

Aurora, CO 80011

6. 21151 E. 31st Cir.

(Mailing Address)

Aurora, CO 80011

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

Name:

Capitol Corporate Services, Inc.

Office Address:

515 East Park Avenue, 2nd Floor

Tallahassee

(City)

, Florida 32301

(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.

*Kim Tadlock*

(Registered agent's signature)

Kim Tadlock, Asst. Sec. on behalf of  
Capitol Corporate Services, Inc.

FILED  
19 JAN 23 AM 9:55  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

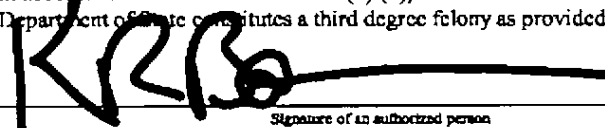
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Kevin R. Bauer	<input checked="" type="checkbox"/> Manager	Name: Robert Emmert
<input type="checkbox"/> Member	Address: 21151 E. 31st Cir.	<input type="checkbox"/> Member	Address: 1601 Dodge Street, Suite 3800
<input type="checkbox"/> Authorized	Aurora, CO 80011	<input type="checkbox"/> Authorized	Omaha, NE 68102
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Manager	Name: Chase Meyer	<input checked="" type="checkbox"/> Manager	Name: Jim Pike
<input type="checkbox"/> Member	Address: 1601 Dodge Street, Suite 3800	<input type="checkbox"/> Member	Address: 21151 E. 31st Cir.
<input type="checkbox"/> Authorized	Omaha, NE 68102	<input type="checkbox"/> Authorized	Aurora, CO 80011
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Manager	Name: BJ Hansen	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address: 1601 Dodge Street, Suite 3800	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized	Omaha, NE 68102	<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

19 JAN 23 AM 9:55  
 DEPARTMENT OF REVENUE  
 FLORIDA

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

  
 Signature of an authorized person

Kevin R. Bauer

Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HONEY SMOKED FISH HOLDINGS, 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-THIRD DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HONEY SMOKED FISH HOLDINGS, LLC" WAS FORMED ON THE SECOND DAY OF APRIL, A.D. 2018.

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



6826130 8300

SR# 20190442629

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202128739

Date: 01-23-19