

MA 1000007906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

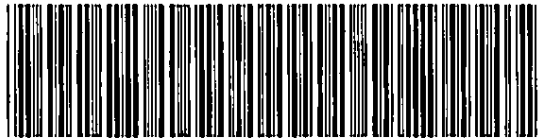
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/28/21--01024--025 **160.00

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21 JUN 18 PM 4: 32
OFFICE OF STATE
TALLAHASSEE, FLORIDA

wp
88083

7/23/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stellex/CF Buyer (US), 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:

Donna Schecker

Name of Person

Stellex/CF Buyer (US), LLC

Firm/Company

3200 Research Forest Dr. Suite A5

Address

The Woodlands, TX 77381

City/State and Zip Code

donna.schecker@freshfoodgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Schecker

516

769-4745

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2021

DONNA SCHECKER
3200 RESEARCH FOREST DR STE A5
THE WOODLANDS, TX 77381

SUBJECT: STELLEX/CF BUYER (US), LLC
Ref. Number: W21000088083

We have received your document for STELLEX/CF BUYER (US), LLC and your check(s) totaling \$160.00. 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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 421A00013527

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. Stellex CF Buyer (US), 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.")

2. Delaware 3. 86-2070317
(Jurisdiction under the law of which foreign limited liability company is organized) (D/EI number, if applicable)

4. 04/30/2021
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0901 & 605.0902, F.S., to determine penalty liability.)

5. 701 Jetstream Drive 6. 3200 Research Forest Drive, Suite A5
(Street Address of Principal Office) (Mailing Address)

Orlando, FL 32824 The Woodlands, TX 77381

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

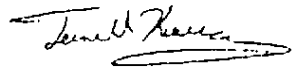
Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation 33324 Florida
(City) (Zip code)

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 TALLAHASSEE, FLORIDA

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.



(Registered agent's signature) Ternell Kearney - Assistant Secretary

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]:

Title or Capacity: Name and Address:
 Manager Name: Donna Schecker
 Member Address: 3200 Research Forest Drive
 Authorized Suite A5
 Person The Woodlands, TX 77384
 Other VP Finance Other

Title or Capacity: Name and Address:
 Manager Name: Steven Pinsky
 Member Address: 3200 Research Forest Drive
 Authorized Suite A5
 Person The Woodlands, TX 77384
 Other CFO Other

Manager Name: Doug Burris
 Member Address: 3200 Research Forest Drive
 Authorized Suite A5
 Person The Woodlands, TX 77384
 Other CFO Other

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other

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 605.020(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.

Donna Schecker
 Signature of an authorized person

Donna Schecker - VP Finance
 Typed or printed name of signer

Delaware


Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STELLEX/CF BUYER (US) 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 THIRTEENTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STELLEX/CF BUYER (US) LLC" WAS FORMED ON THE NINTH DAY OF FEBRUARY, A.D. 2021.




Jeffrey W. Bullock, Secretary of State

5043201 8300

SR# 20211751375

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

Authentication: 203193476

Date: 05-13-21