

# GAGE FOOD PRODUCTS COMPANY

INSTITUTIONAL FOOD SPECIALTIES

**THE MEASURE OF QUALITY**

A DIVISION OF VINCENT FOOD INDUSTRIES INC.

501 NORTH 31ST AVENUE • MELROSE PARK, ILLINOIS

*m98000000738*

April 24, 1998

800002510728--7  
 -05/05/98--01052--001  
 \*\*\*\*\*8.75 \*\*\*\*\*8.75

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

800002510728--7  
 -05/05/98--01052--002  
 \*\*\*\*285.00 \*\*\*\*285.00

To Whom It May Concern:

Enclosed please find our application, all required forms and information, and a check to register our company with your state as a foreign limited liability company for the purpose of transacting business in Florida.

Please contact me at 708/338-1501 if you have any questions.

Sincerely,

*Karen VandenBos*

Karen VandenBos  
 Office Manager

encl.

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Name	Availability
Document Examiner	DCC
Updater	ncc
Updater Verifier	cc
Acknowledgement	DCC
W. P. Verfyer	DCC

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*Same people as 857992*



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

May 6, 1998

KAREN VANDENBOS  
GAGE FOOD PRODUCTS COMPANY  
1501 NORTH 31ST AVENUE  
MELROSE PARK, IL 60160

SUBJECT: GAGE FOOD PRODUCTS, L.L.C.  
Ref. Number: W98000010258

We have received your document for GAGE FOOD PRODUCTS, L.L.C. and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 498A00024986

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. GAGE FOOD PRODUCTS L.L.C.  
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. STATE ILLINOIS LIMITED LIABILITY CO. INC. 3. 39-1919677  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. January 29, 1998 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. 3-2-98  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1501 N. 31<sup>ST</sup> AVE MEADOWS PARK IL 60160  
(Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>RICHARD BIBLER</u>	<u>CHAIRMAN</u>	_____	_____
<u>JAMES PICCIONE</u>	<u>RESIDENT</u>	_____	_____
<u>WARREN BLUMENTHAL</u>	<u>V.P.</u>	_____	_____
<u>ALAN MAREK</u>	<u>V.P.</u>	_____	_____
<u>JAMES MARTIN</u>	<u>VP.</u>	_____	_____
<u>STEVEN BLUMENTHAL</u>	<u>SECY.</u>	_____	_____
<u>KAREN VAN DEN BOS</u>	<u>ASST-SECY.</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)



500 West Brown Deer Road • Suite 104 • Milwaukee, WI 53217  
Telephone (414) 351-2221 Facsimile (414) 351-1062

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Name and Addresses of Officers / *mbr*

Richard S. Bibler  
Suite 104  
500 West Brown Deer Road  
Milwaukee, Wisconsin 53217

James Piccione  
1501 N. 31<sup>st</sup> Avenue  
Melrose Park, Illinois 60160

Warren Blumenthal  
27<sup>th</sup> Floor  
411 East Wisconsin Avenue  
Milwaukee, Wisconsin 53202

Alan Marek  
Suite 1135  
135 South LaSalle Street  
Chicago, Illinois 60603

James Martin  
1501 N. 31<sup>st</sup> Avenue  
Melrose Park, Illinois 60160

Steven Blumenthal  
Suite 2100  
200 North LaSalle Street  
Chicago, Illinois 60601-1095

Karen Vanderbos  
1501 N. 31<sup>st</sup> Avenue  
Melrose Park, Illinois 60160

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TALLAHASSEE, FLORIDA


**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY**

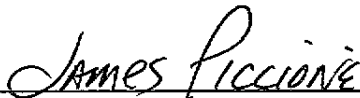
The undersigned member or authorized representative of a member of GAGE FOOD PRODUCTS L.L.C. certifies:

- 1) the above named limited liability company has at least two members;
- 2) the total amount of cash contributed by the member(s) is
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
(A description of the property is attached and made a part hereto.)  
and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is  
(This total includes amounts from 2 and 3 above.)

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TALLAHASSEE, FLORIDA

\$5,500,000.00

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**  
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$250.00 for Application and Affidavit**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

GAGIE FOOD PRODUCTS L.L.C.

2. The name and the Florida street address of the registered agent and office are:

ALAN JAMES

(Name)

682 VENSON CT.

Florida street address (P.O. Box **NOT** ACCEPTABLE)

DELTONA FL FL 32738-8703

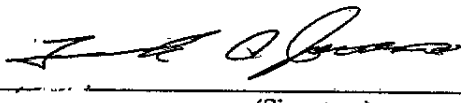
City/State/Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

X 

(Signature)

**Filing Fee: \$ 35 for Designation of Registered Agent**

File Number 0016712-6



To all to whom these Presents Shall Come, Greeting:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, George H. Ryan, Secretary of State of the State of Illinois,  
do hereby certify that

GAGE FOOD PRODUCTS, LLC,  
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON FEBRUARY 04, 1998,  
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED  
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING  
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT  
BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois this 22ND  
day of JUNE A.D., 19 98

*George H Ryan*  
SECRETARY OF STATE