

1.) CORPORATION NAME:

**Hickory Farms, Inc.**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F0550725**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 1,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 811 MADISON AVE  
FL 5

CITY/ST/ZIP: TOLEDO, OH 43604

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|                 |   |  |
|-----------------|---|--|
|                 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | MARK S RODRIGUEZ                            |  |
| TITLE:          | PRESIDENT                                   |  |
| ADDRESS:        | 811 MADISON AVE<br>FL 5<br>TOLEDO, OH 43604 |  |
| CITY/ST/ZIP/CO: |   |  |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | MICHAEL HOLTON                              |                                   |
| TITLE:          | VICE PRESIDENT                              |                                   |
| ADDRESS:        | 811 MADISON AVE<br>FL 5<br>TOLEDO, OH 43604 |                                   |
| CITY/ST/ZIP/CO: |   |                                   |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | JOE LOCH                                    |                                   |
| TITLE:          | VICE PRESIDENT                              |                                   |
| ADDRESS:        | 811 MADISON AVE<br>FL 5<br>TOLEDO, OH 43604 |                                   |
| CITY/ST/ZIP/CO: |   |                                   |

|                 |  |  |
|-----------------|--|--|
|                 | <input type="checkbox"/> OFFICER                           | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | DAVID STEFKO   |  |
| TITLE:          | DIRECTOR   |  |
| ADDRESS:        | 5200 TOWN CENTER CIRCLE<br>STE 600<br>BOCA RATON, FL 33486 |  |
| CITY/ST/ZIP/CO: |  |  |

|                 |  |  |
|-----------------|--|--|
|                 | <input type="checkbox"/> OFFICER                           | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | CLARENCE TERRY   |  |
| TITLE:          | DIRECTOR   |  |
| ADDRESS:        | 5200 TOWN CENTER CIRCLE<br>STE 600<br>BOCA RATON, FL 33486 |  |
| CITY/ST/ZIP/CO: |  |  |

|   |   |                                   |
|---|---|-----------------------------------|
| NAME: JOSEPH HERMAN<br>TITLE: SECRETARY<br>ADDRESS: 811 MADISON AVE<br>FL 5<br>CITY/ST/ZIP/CO: TOLEDO, OH 43604 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
|---|---|-----------------------------------|

|   |   |                                   |
|---|---|-----------------------------------|
| NAME: TY HANLINE<br>TITLE: VICE PRESIDENT<br>ADDRESS: 811 MADISON AVE<br>FL 5<br>CITY/ST/ZIP/CO: TOLEDO, OH 43604 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
|---|---|-----------------------------------|

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |           |
|---|----------------------------------|-----------|
| /s/ JOSEPH HERMAN                                   | JOSEPH HERMAN, SECRETARY         | 7/29/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.