

**L060000016995**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
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Account Name : C T CORPORATION SYSTEM  
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2006 FEB 14 AM 8:48  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**LaBella Sausage, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 1        |
| Page Count            | 045      |
| Estimated Charge      | \$160.00 |

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**W06-7306**

BRN FEB 16 2006



February 15, 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: LABELLA SAUSAGE, LLC  
REF: W06000007306

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Please refax your document we only received the 1st page of articles,

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P.O. BOX 6327 - Tallahassee, Florida 32314

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: LaBella Sausage, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and Doc(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bernadette M. Dennehy, Esq.  
(Name of Person)

Dickinson Wright PLLC  
(Firm/Company)

500 Woodward Ave., Suite 4000  
(Address)

Detroit, MI 48226  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bernadette M. Dennehy at ( 313 ) 223-3500  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |                                              |                                                                         |                                                                                                   |                                                                                                                                        |
|----------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|----------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|

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

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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DIVISION OF REVENUE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

LaBella Sausage, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

16170 Aviation Drive  
Brooksville, FL 34609

### Mailing Address:

16170 Aviation Drive  
Brooksville, FL 34609

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

CT Corporation System

Name

1200 S. Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation

FL 33324

City, State, and Zip

*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 as provided for in Chapter 608, F.S.*

By: Connie Bury

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Index**

**"MGR" = Manager**

"MGRM" - Managing Member

**Name and Address:**

1408

George Ruppel  
16170 Aviation Drive  
Brooksville, FL 34609

**NGR**

Barry T. Shapiro c/o The Anderson Group, Inc.  
121 W. Long Lake Rd., 3rd Fl.  
Bloomfield Hills, MI 48304

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)**  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

(In accordance with section 604.40(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

By Thomas Gaffney, Authorized Representative  
*Typed or printed name of signer*

## References

3 \$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent  
4 3 \$4.00 Certified Copy (Optional)  
5 4 \$6.00 Certificate of Status (Optional)