

L99000007944

Information needed for Dicken's Cider Tees Ltd. Co.

Dale Marchetti
2308 Dixie Hwy
Wilton Manors, Fl. 33305

(954) 564-0773

800003038749--3
-11/08/99--01128--017
***160.00 ***160.00

Filing Fees:
\$100.00 Filing fee for the Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy
\$ 5.00 Certificate of Status

\$160.00 CK# 2461

FILED
99 NOV 18 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~WAA-25899~~

00789 | 02595 | 00623 | 00671

JB 11-19-99



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 9, 1999

DALE MARCHETTI
2308 DIXIE HWY.
WILTON MANORS, FL 33305

SUBJECT: DICKEN'S CIDER TEES LTD. CO.
Ref. Number: W99000025899

We have received your document for DICKEN'S CIDER TEES LTD. CO. 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 name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6025.

Trevor Brumbley
Document Specialist

Letter Number: 399A00054206

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **DICKEN'S CIDER TEES L.L.C.**

ARTICLE II - Address:

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

2308 Dixie Hwy, Wilton Manors, FL. 33305

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

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

<u>Dale Marchetti</u>
Name
<u>2308 Dixie Hwy</u>
Florida street address (P.O. Box NOT acceptable)
<u>Wilton Manors FL 33305</u>
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..

Dale Marchetti
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROBERT MARCHETTI
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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