

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

**LD000000 10949**

**AROMANUTZ!, LLC**

**800003389718--4**  
-09/12/00--01032--025  
\*\*\*\*160.00 \*\*\*\*160.00

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File **Cert**
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☒ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

00 SEP 12 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

00 SEP 12 AM 11:02  
RECEIVED

Signature \_\_\_\_\_

Requested by: **CD**

Name \_\_\_\_\_

Date **9/12/00**

Time **11:00**

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

**ARTICLES OF ORGANIZATION**

**OF**

**AROMANUTZI, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I - NAME:**

The name of the limited liability company shall be:

AROMANUTZI, LLC

**ARTICLE II - ADDRESS:**

The mailing address and street address of the principal office of the company shall be:

3807 Belmont Boulevard  
Sarasota, FL 34232

**ARTICLE III - REGISTERED OFFICE AND AGENT**

The name and street address of the registered agent of the company in the State of Florida is:

John E. Napolitano  
677 North Washington Boulevard  
Sarasota, Florida 34236

*Having been named as the 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.*

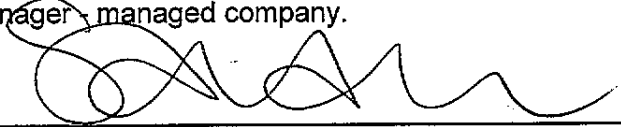
  
John E. Napolitano  
Registered Agent

APPROVED  
AND  
FILED  
00 SEP 12 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV – MANAGEMENT (Check box if applicable.)**



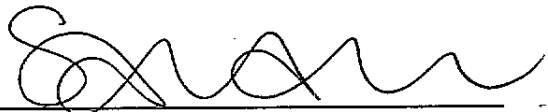
The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager managed company.



**Signature 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.)

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization in Sarasota, Florida, on this \_\_\_\_ day of September, 2000.



Sarah Kenniff  
Member

STATE OF FLORIDA  
COUNTY OF SARASOTA

Sworn to and subscribed before me this 8<sup>th</sup> day of September, 2000, by Sarah Kenniff.

  
Notary Public – State of Florida  
(Seal)

Personally Known ☒  
Identification Produced \_\_\_\_\_



Janith P. Sheffield  
MY COMMISSION # CC813740 EXPIRES  
March 1, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

APPROVED  
AND  
FILED  
00 SEP 12 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA