LOIOOQOO HO34 Fl Dept. of State Tallahossee, Fl

To Whom It May Cover:

As requested this letter accompanies to the articles of organization for the LLC. My name is STEPHEN B. ANDERSON Address 4213 S.W. 80TH St.

> Gainesville, FC 32608 Daytine Phone 352-336-2457

> > SJB, OL

101-4034 QR



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 6, 2001

STEPHEN ANDERSON 4213 S.W. 80TH STREET GAINESVILLE, FL 32608

SUBJECT: ANDY'S YOGURT COMPANY

Ref. Number: W0100005089

We have received your document for ANDY'S YOGURT COMPANY and your check(s) totaling \$125.00. 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."

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 201A00013636

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

9	
ARTICLE I - Name: The name of the Limited Liability Company is: $A \wedge D \vee s = A \wedge C \wedge$	OF COMPANY LLC.
The name of the Emilied Elability Company is. 7170 975 70 80	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited L	iability Company is:
GAINESVILLE, FL 32605	
GAINES WILL CO	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent	a Ciamatura
Milione in Acquiered Agent, Registered Office, & Registered Agent	s Signature:
The name and the Florida street address of the registered agent are:	OI M
STEPHEN B. ANDERSON	FIL HAR 15
STEPHEN B. ANDERSON Name 4213 5. ω. 80 TH 5T. Florida street address (P.O. Box NOT acceptable) GRINESUILLE FL 32608	ILED 5 PM 3: 53 3Y OF STATE SEE, FLORID,
Florida street address (P.O. Box NOT acceptable)	- π _ω ω
GAINESUILLE FL 32608	3: 5
City, State, and Zip	DE 3
Having been named as registered agent and to accept service of process for the a liability company at the place designated in this certificate, I hereby accept the apagent and agree to act in this capacity. I further agree to comply with the provisi relating to the proper and complete performance of my duties, and I am familiar obligations of my position as registered agent as provided for in Chapter 608, F.S. Registered Agent's Signature	opointment as registered ions of all statutes with and accept the
Registered Agent's Signature	
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or motherefore, a manager - managed company.	re managers and is,
(An additional article must/be)added if an effective date is rec	[uested]
Signature of a member or an authorized representative of a men	iber.
(In accordance with section 608.408(3), Florida Statutes, the executor of this document constitutes an affirmation under the penalties of pethat the facts stated herein are true.)	tion erjury
STERRED B ANDERSON	

Filing Fees:

Typed or printed name of signee

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)