1000016865

Requestor's Name		
660 E. Jefferson St.		
Tallahassee, FL 32301 City/St/Zip	850-222-2785 Phone #	3000046203938 -10/02/0101053006 ****125.00 ****125.00
CORPORATION NAME(S)	& DOCUMENT NUMBER(S), (if known):
1- HITE SACCHI, L.L.C).	

DIVISION OF CORPORATION 01 OCT -2 PH 1:55

Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

Resignation of R.A., Officer/Director

Change of Registered Agent

Photocopy

Pick-up time ASAP

Will wait

AMENDMENTS

Amendment

X Walk-in

Mail-out

NEW FILINGS

Profit

Other

OTHER FILINGS

Non-Profit

XXX Limited Liability

Domestication

Annual Report

Fictitious Name

Name Reservation

Examiner's Initials

Certified Copy

Certificate of Status

ARTICLES OF ORGANIZATION

of

HITE SACCHI, L.L.C.

ARTICLE I – Name:

The name of the Limited Liability Company is:

Hite Sacchi, L.L.C.

ARTICLE II - Address:

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

204 E. Terrace Drive Plant City, Florida 33565

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

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

| Richard Sacchi | Name | Sacchi | Sacchi

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.

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.

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.)

Kent Runnells

Typed or printed name of signee

OLOCI -2 PM 3: 0: SCOLETAKY OF STATE