

CT CORPORATION

CORPORATION(S) NAME

LD200 DDD 1661

Southern Fresh Foods, LLC

☐ Profit

☐ Amendment

☐ Merger

☐ Nonprofit

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Reinstatement

☐ Limited Partnership

☐ Annual Report

☐ Other

☒ LLC

☐ Name Registration

☐ Change of RA

☐ Fictitious Name

☐ UCC

☒ Certified Copy

☐ Photocopies

☐ CUS

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

1/23/02

Order#: 5071671

Availability _____

Document

Examiner _____

Updater _____

Verifier _____

W.P. Verifier _____

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-01/23/02--01038--015

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Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

JB
1-23-02

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AND
FILED

02 JAN 23 PM 12:45

CLERK OF STATE
TALLAHASSEE, FLORIDA

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02 JAN 23 AM 11:11

CLERK OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
SOUTHERN FRESH FOODS, LLC**

**ARTICLE I
NAME**

The name of this limited liability company is SOUTHERN FRESH FOODS, LLC.

**ARTICLE II
DURATION**

This limited liability company shall have perpetual existence.

**ARTICLE III
PURPOSE**

This limited liability company is organized for any lawful purpose, except that special statutes for the regulation and control of specific types of business shall control when in conflict with these Articles of Organization.

**ARTICLE IV
ADDRESS**

The principal place of business and mailing address of this limited liability company shall be 1500 Avenue P, Riviera Beach, Florida 33404.

**ARTICLE V
INITIAL REGISTERED AGENT AND OFFICE**

The initial registered agent of this limited liability company is CT Corporation System, and the initial registered agent's office address shall be 1200 South Pine Island Road, Plantation, FL 33324.

**ARTICLE VI
MANAGEMENT**

This limited liability company is a member-managed company.

**ARTICLE VII
POWERS**

This limited liability company shall have all of the powers enumerated in the Limited Liability Act.

**ARTICLE VIII
ADMISSION OF NEW MEMBERS**

The members shall have the right to admit new members. The terms and conditions for the admission of new members are as follows:

Any person or entity approved by a unanimous written consent of all existing members may, subject to the terms of the Regulations, become an additional member in the limited liability company by the sale of new interests for such consideration as the members shall determine.

02 JAN 23 PM 12:45
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ARTICLE IX
RIGHT OF CONTINUANCE

The members shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in the limited liability company.

ARTICLE X REGULATIONS

The Regulations may be adopted, altered, amended or repealed by the members.

IN WITNESS WHEREOF, a member of the limited liability company has executed these Articles of Organization on the 23 day of January, 2002, and affirms under the penalties of perjury that the facts contained in these Articles of Organization are true to the best of his knowledge.

Andrew R. Friedman, Authorized Agent

02 JUN 23 PM12:45
SECURITY OF STATE
ALLAHABAD, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Southern Fresh Foods, LLC
2. The name and address of the registered agent and office is:

CT Corporation System
c/o CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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.

SIGNATURE Carrie Bryan
(Registered Agent)

DATE: 1-23-02

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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