L02000005383

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

800005000998--6 -02/25/02--01064--003 ******78.75 ******78.75

SUBJECT:	Fruit2Juice LLC			
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) 8000050009986			
	•	·	-03/07/0201002012	
		•	*****51.25 *****51.25	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
—	F72 0.70 77	\$78.75	□ \$87.50	
\$70.00	≅ \$78.75	Filing Fee		
Filing Fee	Filing Fee	& Certified Copy	Filing Fee, Some Some Some Some Some Some Some Some	
	& Certificate of Status	& Cerunea copy	Certified Copy 5 8 8 Certificate 26 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
			Status SB	
	:	ADDITIONAL CO	PY RECUITRED TO THE	
		ADDITIONAL CO.	PY REQUIRED 5	
FROM:	Fruit2Juice LLC	- <u>-</u>	3: 57 STATE LORID	
FROM	Name (Printed or typed)			
212 East Stuart Avenue				
Address @2				
6307				
Lake Wales, FL 33853				
Lake Wales, FL 33853				
City, State & Zip				
	863 679-9595			
Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 1, 2002

FRUIT2JUICE LLC 212 EAST STUART AVENUE LAKE WALES, FL 33853

SUBJECT: FRUIT2JUICE LLC Ref. Number: W02000005725

We have received your document for FRUIT2JUICE LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 802A00012552

R-6 PM 3:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Fruit 2 Juice, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
212 East Stuart Avenue, Lake Wales, FL 33853
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
John R. Alexander Name
212 East Stuart Avenue Florida street address (P.O. Box NOT acceptable) Lake Wales FL 33853 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. Registered Agent's Signature
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more manager and is therefore, a manager - managed company. (An additional article must be added if an effective date is requested) 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.)
John R. Alexander Typed or printed name of signee Filing Fees: \$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)