Division of Corporations

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Florida Department of State

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From:

Account Name : ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273 Phone : (904)398-3911 Fax Number : (904)396-0663 UZ JUN ZU PMIZ: 29

LIMITED LIABILITY COMPANY

Chef's Market of Jacksonville, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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6/24/2002

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ARTICLES OF ORGANIZATION OF CHEF'S MARKET OF JACKSONVILLE, LLC

<u>ARTICLE I - NAME</u>

The name of this Limited Liability Company is Chef's Market of Jacksonville, LLC (the "Company").

<u>ARTICLE II - ADDRESS</u>

The address of the principal office and the mailing address of the Company is 1727 Bennett Street, Jacksonville, Florida 32206.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 1727 Bennett Street, Jacksonville, Florida 32206, and the name of its initial registered agent at such address is Electus P. Slater.

ARTICLE IV - MANAGEMENT OF THE COMPANY

The Company will be manager-managed.

IN WITNESS WHEREOF, the undersigned person has executed these Articles of Organization this ___/ _____ day of May, 2002.

CHEF'S MARKET OF JACKSONVILLE, LLC

Electus P. Slater

Authorized Representative

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415, Florida Statutes, the below named limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

I. The name of the limited liability company is:

Chef's Market of Jacksonville, LLC

II. The name and address of the registered agent and office are:

Electus P. Slater 1727 Bennett Street Jacksonville, Florida 32206

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.

Electus P. Slater

Date: <u>May 1, 200</u>2

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