Requester's Name 1240 Wost 13 A Address Riviera Blach, From #		710 Marsh 20 Paris 34 Constant of State
		Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S),	if known):
1. (Corporation Name)	(Document #)	
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2. (Corporation Name)	(Document #)	
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		Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	
_		
Profit Not for Profit	Amendment Resignation of	R.A., Officer/Director
Limited Liability	Change of Reg	
Domestication	Dissolution/Wi	thdrawal
☐ Other	☐ Merger	
OTHER FILINGS	REGISTRATION	<u>QUALIFICATION</u>
☐ Annual Report	☐ Foreign	
☐ Fictitious Name	Limited Partne	rship
	Reinstatement Trademark	
	Other	
CR2E031(7/97)		Examiner's Initials

J. BRYAN SEP 2 3 2002

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIC	LE I	- Na	ine:
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The name of the Limited Liability Company is: RIVIERA OLIVE OIL COMPANY LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1240 WEST 13 ST. RIVERA BEACH FLORIDA 33404

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

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

CARLO VACCAREZZA
Name

15620 LATINA SLACE
Florida street address (P.O. Box NOT acceptable)

WELLINGTON FL 33414

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

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.

(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.)

CARLO VACCAREZZA

Typed or printed name of signee

Filing Free

\$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)