

L02000026326

(904) 471-7441

RICHARD G. OLIVER II

Phone: 904-794-1961 Cell Phone: 904-347-6119

4057 Seminole Point Court St. Augustine, FL 32086

③ FL LLC

10/7

CC-2005

00789-00623-00671

W02-25581

Enclosed is the form for Articles Of Organization and a check for \$160.00

We are trying to open this retail business by September 15th 2002 at 4255 A1A
South #11 St. Augustine, FL 32080

Rich Oliver
Sugar Free For Life

900007460829--1

-09/03/02--01008--004

***160.00 ***160.00

FILED

02 OCT -7 AM 9:46

STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

September 4, 2002

RICH OLIVER
4057 SEMINOLE POINT COURT
ST. AUGUSTINE, FL 32086

SUBJECT: SUGAR FREE FOR LIFE LLC
Ref. Number: W02000025581

We have received your document for SUGAR FREE FOR LIFE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 002A00050995

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Sugar Free For Life LLC

ARTICLE II - Address:

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

4255 A1A South #11 ST. AUGUSTINE FL 32080

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

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

Richard Oliver

Name

4057 Seminole Pt. Ct.

Florida street address (P.O. Box NOT acceptable)

ST. AUGUSTINE FL 32086

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.

[Signature]

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.

(An additional article must be added if an effective date is requested)

[Signature]
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.)

Richard Oliver

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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