

L03 000013119

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L03-13119  
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**Matthew L. DeVicchio**

**Attorney at Law**

April 7, 2003

Florida Department of State  
Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Attention: Clerk

RE: Limited Liability Company: Naples Pretzel, LLC.  
Location: 1900 N. Tamiami Trail, FC11/Remote Location, Naples, FLA 34102

Dear Clerk:

Enclosed please find Articles of Organization for Florida Limited Liability Company regarding the above-captioned matter.

Also enclosed please find our firm check in the sum of \$160.00 for the filing fee, Designation of Registered Agent, Certified Copy, Certificate of Status of this Limited Liability Company.

If you have any questions, please do not hesitate to contact our office. Please forward all correspondence relative to Naples Pretzel, LLC to the address provided herein.

Thank you for your assistance in this matter.

Very truly yours,

Matthew L. DeVicchio  
Attorney at Law

MLD:vlp

Enclosures

RECEIVED  
TALLAHASSEE, FLORIDA  
APR 7 2003

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Naples Pretzel, LLC

**ARTICLE II - Address:**

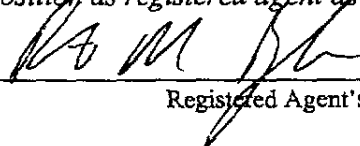
The mailing address and street address of the principal office of the Limited Liability Company is:  
1900 N. Tamiami Trail, FCI1/Remote Location, Naples, Florida 34102

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

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

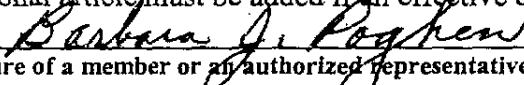
Robert Poghen  
Name  
118 Palm Drive #A-16  
Florida street address (P.O. Box **NOT** acceptable)  
Naples FL 34112  
City, State, and Zip

*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

FILED  
2019 APR 10 2:28  
CLERK OF BOARD  
TAMMASEE, FLORIDA

(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.)

Barbara J. Poghen  
\_\_\_\_\_  
Typed or printed name of signee