

L03 000013119

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STATE OF TEXAS

FILE

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:

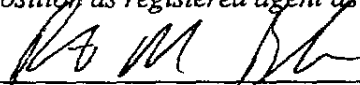
The mailing address and street address of the principal office of the Limited Liability Company is:
1900 N. Tamiami Trail, FC11/Remote Location, Naples, Florida 34102

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

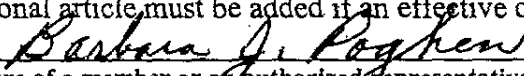
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 COUNTY
TREASURER
TAMPA, 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