

L03000016461

BROWN SUGAR Bakery
8009 South U.S.1.
Port St-Lucie 34952

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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2003 MAY -7 PM 3:15
CORPORATIONS
TALLAHASSEE, FLORIDA

W03-12114
J. BRYAN APR 29 2003

J. BRYAN MAY - 7 2003



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 29, 2003

BROWN SUGAR BAKERY
8009 SOUTH US HWY 1
PORT ST. LUCIE, FL 34952

SUBJECT: BROWN'S SUGAR CARIBBEAN BAKERY L.L.C.
Ref. Number: W03000012114

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for BROWN'S SUGAR CARIBBEAN BAKERY L.L.C. and your check(s) totaling \$155.00. 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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 003A00025884

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: BROWN'S SUGAR CARIBBEAN BAKERY L.L.C.
The name of the Limited Liability Company is:

ARTICLE II - Address: 8009 South U. S. Hwy I. Port St Lucie
The mailing address and street address of the principal office of the Limited Liability Company is:
FL. 34952

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

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

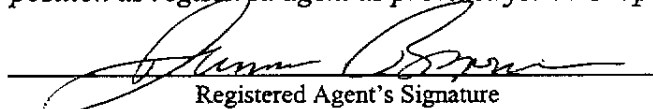
JUNOR BROWN
Name

674 S.E. DAMASK AVE
Florida street address (P.O. Box **NOT** acceptable)

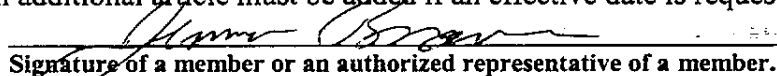
Port St Lucie. FL 34983
City, State, and Zip

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2009 MAY - 7 PM 3:15
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

(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.)

JUNOR BROWN
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)