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ACCOUNT NO. : 072100000032 REFERENCE : 105589 AUTHORIZATION : COST LIMIT : \$ 155.00 ORDER DATE: May 23, 2003 ORDER TIME: 12:39 PM ORDER NO. : 105589-005 CUSTOMER NO: 7154690 CUSTOMER: Ms. Christelle Clement Re, Parser & Partners 445 Park Avenue 14th Floor New York, NY 10022-2606 DOMESTIC FILING NAME: K2 ICE CREAM & CAFES, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY \_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight - EXT. 1156 EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: K2 ICE CREAM & CAFES, ELC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability  Company is: 4624 Swordfish Drive, Bradenton, Florida 34208
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Mats Israelsson Name
4624 Swordfish Drive Florida street address (P.O. Box NOT acceptable)
Bradenton, Florida 34208 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.
Mats Israelsson, registered agent

(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.)

Mais Israelsson, member