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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

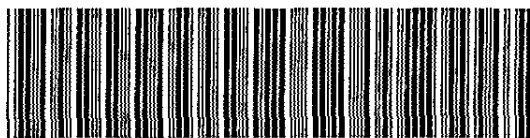
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/14
Curtis



3780 SOUTHBANK CIRCLE
GREEN COVE SPRINGS, FL 32043
904-477-8026

July 7, 2003

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed, please find an Articles of Incorporation to form a Florida Limited Liability Company. If you have any questions I can be reached at 904-477-8026 or a message can be left at 904-291-8637.

Sincerely,

A handwritten signature in cursive script that reads 'Lori Hicks'.

Lori Hicks

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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sweet Indulgence, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lori Hicks
(Name of Person)

Sweet Indulgence
(Firm Company)

3780 Southbank Circle
(Address)

Green Cove Springs, FL 32043
(City State and Zip Code)

For further information concerning this matter, please call:

Lori Hicks at (904) 477-8026
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sweet Indulgence, LLC

ARTICLE II - Address:

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

Principal Office Address:

3780 Southbank Circle
Green Cove Springs, FL 32043

Mailing Address:

3780 Southbank Circle
Green Cove Springs, FL 32043

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

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

Lori Hicks
Name
3780 Southbank Circle
Florida street address (P.O. Box **NOT** acceptable)
Green Cove Springs FL 32043
City, State, and Zip

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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.

Lori Hicks
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Lori Hicks

3780 Southbank Circle

Green Cove Springs, FL 32043

MGR

Daryl Hicks

3780 Southbank Circle

Green Cove Springs, FL 32043

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Lori Hicks

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.)

Lori Hicks

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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