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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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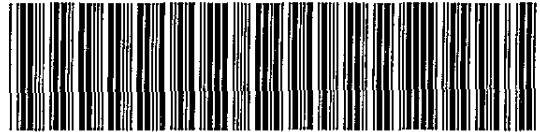
(Business Entity Name)

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2003 AUG 25 PM 12:33
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN AUG 28 2003

Cocoanuts Brownies, LLC
2657 SW Harem Circle
Port St. Lucie, FL 34953
(772) 370-6403

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2003 AUG 25 PM 12:33
CLERK OF COURTS
PALM BEACH COUNTY, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cocoanuts Brownies, 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:

Holly Stone
(Name of Person)

Cocoanuts Brownies, LLC
(Firm/Company)

2657 SW Harem Circle / P.O. Box 7699
(Address)

Port St. Lucie, FL 34953
(City/State and Zip Code)

For further information concerning this matter, please call:

Holly Stone at (772) 370-6403
(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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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cocoanuts Brownies, LLC

ARTICLE II - Address:

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

Principal Office Address:

2657 SW Harem Circle
Port St. Lucie, FL 34953

Mailing Address:

P.O. Box 7699
Port St. Lucie, FL 34952

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

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

Holly Stone
Name
2657 SW Harem Circle
Florida street address (P.O. Box **NOT** acceptable)
Port St. Lucie FL 34953
City, State, and Zip

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DIVISION 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..

Holly Stone
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

I

Name and Address:

MGR

Holly Stone
2657 SW Harem Cr.
Port St. Lucie, FL 34953

MGRM

Brian Stone
2657 SW Harem Cr.
Port St. Lucie, FL 34953

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

I

Holly Stone

~~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.)

Holly Stone

~~Typed or printed name of signer.~~

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)

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TALLAHASSEE, FLORIDA