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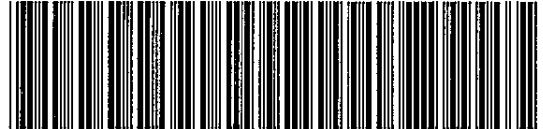
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03 DEC 18 PM 12:10

DIVISION OF CORPORATION

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03 DEC 18 PM 3:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*BK*

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Lamade USA LLC

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☒ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature

Requested by: *SW*

*12/18*

Name

Date

Time

Walk-In

Will Pick Up

**ARTICLES OF ORGANIZATION**  
**LAMADE USA, LLC**

The undersigned subscriber, hereby forms a limited liability company under the laws of the State of Florida, Florida Statutes, Chapter 608 as follows:

**ARTICLE I**  
**NAME**

The name of this limited liability company shall be LAMADE USA, LLC.

**ARTICLE II**  
**DURATION**

This limited liability company shall exist no longer than thirty (30) years from the date of filing with the Department of State.

**ARTICLE III**  
**PURPOSE AND POWERS**

This limited liability company is organized for the purpose of conducting any and all lawful business not in conflict with the Statutes of the State of Florida. This limited liability company shall have all powers enumerated in Chapter 608 mentioned above.

**ARTICLE IV**  
**PRINCIPAL OFFICE AND MAILING ADDRESS**

The principal place of business of the limited liability company is at 4301-A Sunset Beach Boulevard, Niceville, Florida 32578. The mailing address of the limited liability company is 4301-A Sunset Beach Boulevard, Niceville, Florida 32578.

**ARTICLE V**  
**INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this limited liability company is 4 Eleventh Avenue, Suite One, Shalimar, Florida 32579 and the name of the initial registered agent at that address is LISA Y. PITELL.

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**ARTICLE VI**  
**CAPITAL**

The capital of the limited liability company that will be contributed shall be the sum of One Thousand Dollars (\$1,000.00).

**ARTICLE VII**  
**MANAGEMENT**

The name and address of the manager of the limited liability company is as follows:

Raimund Herden  
P.O. Box 5277  
Niceville, Florida 32578

Management shall be by all persons or authorized representatives thereof above named, with majority vote controlling.

**ARTICLE VIII**  
**INITIAL MEMBERS**

The name and address of the initial member of this limited liability company is as follows:

Raimund Herden  
P.O. Box 5277  
Niceville, Florida 32578

**ARTICLE IX**  
**ADDITIONAL MEMBERS**

The members of the limited liability company shall have the right to admit additional members upon unanimous written consent of all the members of the company existing at that time.

**ARTICLE X**  
**DISSOLUTION**

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of any member of this limited liability company or the occurrence of any other event which terminates the continued membership of a member of the limited liability company, the limited liability company shall be terminated unless the business is continued by the consent of all remaining members.

**ARTICLE XI**  
**TRANSFER OF INTEREST**

A member may transfer that member's right to receive shares of profits and returns of capital contributions, but may not assign any of the rights to participate in the management or to be a member of the limited liability company unless prior written consent is obtained by the transferor from all remaining members.

**IN WITNESS WHEREOF**, the undersigned, being the member hereinbefore named, has hereunto set his hand and seal on this the 16 day of December, 2003, for the purpose of forming a limited liability company to do business both within and without the State of Florida and does make and file in the Office of the Secretary of State of Florida these Articles of Organization and certifies that the facts herein stated above are true.

**MEMBER:**

  
RAIMUND HERDEN

STATE OF FLORIDA  
COUNTY OF OKALOOSA

The foregoing instrument was executed and acknowledged before me this 16 day of December, 2003, by **Raimund Herden**, who personally appeared and who is personally known to me or who produced a drivers license as identification and who did not take an oath.

**WITNESS** my hand and official seal in the State and County last aforesaid this 16 day of December, 2003.



Notary Public  
My commission expires:



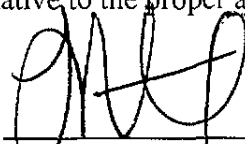
**CERTIFICATE DESIGNATING PLACE OF BUSINESS  
OR DOMICILE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED**

Pursuant to Section 608.415, Florida Statutes, the following is submitted: LAMADE USA, LLC, desiring to organize under the laws of the State of Florida with its principal place of business at 4301-A Sunset Beach Boulevard, Niceville, Florida 32578, has named **Lisa Y. Pitell** as its agent to accept service of process within the State of Florida and whose address is 4 Eleventh Avenue, Suite One, Shalimar, Florida 32579.

**MEMBER:**

  
\_\_\_\_\_  
RAIMUND HERDEN

Having been named to accept service of process for the above named corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all Florida Statutes relative to the proper and complete performance of my duties.

  
\_\_\_\_\_  
LISA Y. PITELL  
Registered Agent