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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

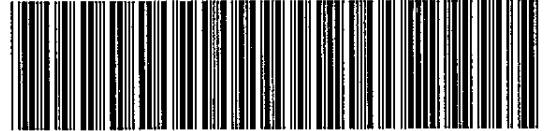
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DIVISION OF CORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

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

Tropical Flavors Ice Cream
Enterprises, Inc.

Signature _____

Requested by: _____

Name

Date

Time

Walk-In _____

Will Pick Up _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

____ Art of Inc. File
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✓ ____ L.C. File
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____ 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

ARTICLES OF ORGANIZATION OF

**TROPICAL FLAVORS ICE CREAM ENTERPRISES, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: Tropical Flavors Ice Cream Enterprises, LLC

ARTICLE II — Address:

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

118 NE 193rd Terrace, Miami, FL 33179

Article III — Registered Agent, Registered Office

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

Wayne H. Rassner, Esquire
Kramer & Rassner, P.A.
7700 N. Kendall Drive, Suite 510
Miami, FL 33156

Article IV — Management:

The Limited Liability Company is to be managed by a manager or managers and is, therefore, a manager-managed company.


IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 12th day of December, 2003.


Paul Johnson, Member


William Moran, Member

In accordance with section 608.408(3), Florida Statutes, the execution of this change constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


Paul Johnson, Member


William Moran, Member

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Page Two

Treebel Flower Ice Cream Enterprises, LLC

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)



Wayne H. Kessner, Registered Agent
7700 N. Kendall Drive, Suite 510
Miami, FL 33156