

L040000 57411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

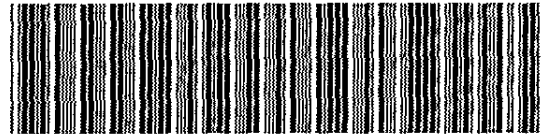
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500038335435

07/28/04--01028--004 **125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL 28 AM 7:53

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOPH FOODS, 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:

Christopher N. Biggs
(Name of Person)

(Firm/Company)

2825 SW 117 Avenue

(Address)

Davie, Florida 33330

(City/State and Zip Code)

For further information concerning this matter, please call:

J.B. deRosset

(Name of Person)

at (305) 670-1808

(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL 28 AM 7:53

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

TOPH FOODS, LLC

ARTICLE II - Address:

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

Principal Office Address:

2825 SW 117 Avenue

Davie, FL 33330

Mailing Address:

2825 SW 117 Avenue

Davie, FL 33330

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

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

J.B. deRosset, Esq.
Name

9100 S. Dadeland Blvd., Suite 512
Florida street address (P.O. Box NOT acceptable)

Miami FLORIDA 33156
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, Florida Statutes..


Registered Agent's Signature

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL 2009 11:53

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:

MGRM

Christopher N. Biggs
2825 SW 117 Avenue
Davie, FL 33330

MGRM

Beverly F. Biggs
2825 SW 117 Avenue
Davie, FL 33330

MGRM

Christopher F. Biggs
13878 SW 32nd Street
Miramar, FL 33027

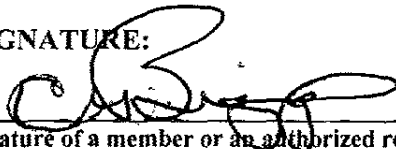
MGRM

Courtney Biggs Perez
3540 SW 144th Avenue
Miramar, FL 33027

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

Christopher N. Biggs

Typed or printed name of signee

04 JUL 28 AM 7:53

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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)