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# TRANSMITTAL LETTER

TO: Registration So Division of Co			
SUBJECT:	Whole Grain (Name of Limite	Blue 5 UC d Liability Company)	
	<b>(.</b>		
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Planton Planton villa installa	GARY WARR	EV	
	(1	Vame of Person)	
	a	Firm/Company)	<del></del>
	[2017 CAVALE	(Address)	
	JACKSONVILLE F	= 32246	
	(3		
	concerning this matter, please	<b>Anc</b>	
GARY WAR	ren	at ( 10 4 ) 635 - (Area Code & Daytime To	-S8 <i>5</i> 8
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	r the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:		MAILING A	DDRESS:

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

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Whole Grain Blues LLC

ARTICLE II - Address:

Principal Office Address: 12017 Cavalry Court Jacksonville, FL 32246

Mailing Address: 12017 Cavalry Court Jacksonville, FL 32246

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

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

Gary Warren 12017 Cavalry Court Jacksonville, FL 32246

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..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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## ARTICLE IV - Managers or Managing Members:

Title:

Name and Address:

Managing Member

Gary A. Warren 12017 Cavalry Court Jacksonville, FL 32246

Managing Member

Julia S. Warren 12017 Cavalry Court Jacksonville, FL 32246

ARTICLE V - Purpose

The purpose or purposes for which the limited liability company is formed are ownership and operation of one or more Great Harvest Bread Company franchises.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with sections 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.)

Gary Warren
Typed or printed name of signee.

Filing Fees:

\$125.00 Filing Fee for Articles or Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Maria Helena, LLC  (Name of Limited Liability Company)					
The enclosed Articles of Organization and fee(s) are	e submitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Stuart Koenig					
	(Name of Person)				
Maria Helena, LLC					
	(Firm/Company)				
2006 Little Torch Street					
	(Address)				
Riviera Beach, Florida 33407					
(Cı	ity/State and Zip Code)				
For further information concerning this matter, please	se call:				
Stuart Koenig	at ( 513 ) 237-9543				
(Name of Person)	(Area Code & Daytime To	elephone Number)			
Enclosed is a check for the following amount:					
L\$125.00 Filing Fee Status	\$ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

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