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ME

TRANSMITTAL LETTER

EFFECTIVE DATE

11/1/05

TO: Registration Section
Division of Corporations

SUBJECT: NATURALLY DIVINE, L.L.C.
(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:

LOUISE DIVINE

(Name of Person)

NATURALLY DIVINE, L.L.C.

(Firm/Company)

3546 BAUM ROAD

(Address)

TALLAHASSEE, FLORIDA 32309

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT S. JETT, JR., CPA

(Name of Person)

at (850) 386-2639

(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

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NATURALLY DIVINE, L.L.C.

EFFECTIVE DATE
11/1/05

SECRETARIAL STAMP
TALLAHASSEE, FLORIDA
REC'D BY FLORIDA
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FILED

ARTICLE II - Address:

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

Principal Office Address:

NATURALLY DIVINE, L.L.C.

3546 BAUM ROAD

TALLAHASSEE, FL. 32309

Mailing Address:

NATURALLY DIVINE, L.L.C.

3546 BAUM ROAD

TALLAHASSEE, FL. 32309

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

LOUISE DIVINE

Name

3546 BAUM ROAD

Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE,

FLORIDA

32309

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

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:

LOUISE DIVINE

3546 BAUM ROAD

TALLAHASSEE, FL. 32309

"MGRM"

HERMAN E. HOLLEY

3546 BAUM ROAD

TALLAHASSEE, FL 32309

(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.)

LOUISE DIVINE

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

S-5.00 Certificate of Status (Optional)

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY
(ATTACHMENT)**

NATURALLY DIVINE, L.L.C.

ARTICLE V – EFFECTIVE DATE:

The effective date of this Limited Liability Company is to be January 1, 2005.