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# LIMITED LIABILITY COMPANY

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CVISTA, LLC

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### ARTICLES OF ORGANIZATION

#### **OF**

### CVISTA, LLC

The undersigned hereby present these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

# **ARTICLE I**

#### NAME

The name of the Limited Liability Company is CVISTA, LLC

#### ARTICLE II

#### PRINCIPAL OFFICE

The mailing address of the Limited Liability Company is Post Office Box 1600, Highlands City, Florida 33840-1600 and the street address of the principal office of the Limited Liability Company is 3071 Shoal Creek Drive, Lakeland, Florida 33803.

#### ARTICLE III

#### DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

### **ARTICLE IV**

### **PURPOSE**

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

### **ARTICLE V**

#### **MANAGEMENT**

The Limited Liability Company is to be a manager-managed company. The

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name(s) and addresses of the initial managers are:

- (1) TASTESPIRE, INC., a Florida corporation Post Office Box 1600 Highlands City, Florida 33840-1600
- (2) Hadi B. Lashkajani 3071 Shoal Creek Drive Lakeland, Florida 33803

#### , ARTICLE VI

# INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is 3071 Shoal Creek Drive, Lakeland, Florida 33803, and the name of the initial registered agent of the Limited Liability Company at that office is Hadi B. Lashkajani.

#### **ARTICLE VII**

#### INDEMNIFICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

IN WITNESS WHEREOF, the under	signed Members have	executed	these	ı
Articles of Organization this 3rd day of June	e, 2005.		2605 3	
TASTESPIRE, INC.	_ Hal. 05. Ja	2	.≣ 	C LANSON Security
By: Hal. o. Le	HADI B. LASHKAJANI		ω ~	
Hadi B. Lashkajani, its President			Ģ	٦
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## STATE OF FLORIDA COUNTY OF POLK

Official Seal
SHERRY ELIZASETH POLAY
Notary Public, State of Florida
My comm. expires May 15, 2006
Comm. No. DD106270

(AFFIX NOTARY SEAL)

(Printed Name)

My commission expires:

RY PUBLIC

# STATE OF FLORIDA COUNTY OF POLK

The foregoing Articles Of Organization were acknowledged before me this \_\_\_\_\_\_\_'
day of June, 2005, by Hadi B. Lashkajani, being the President of Tastespire, Inc., a
Florida corporation, on behalf of Tastespire, Inc. He is personally known to me or has
provided his Florida driver's license as identification.

Official Seal
SHERRY ELIZABETH POLAY
Notary Public, State of Florida
My comm. expires May 15, 2006
Comm. No. D0108270

(AFFIX NOTARY SEAL)

(Printed Name)

My commission expires:

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#### **CERTIFICATE OF DESIGNATION**

OF

### REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

The name of the Limited Liability Company is: C VISTA, LLC

The name and street address of its initial registered agent and initial registered office is:

Hadi B. Lashkajani 3071 Shoal Creek Drive Lakeland, Florida 33803

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.

ADÍ B. LASHKAJANI

Date: \_ (-3 - 0)

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