Florida Department of State

Division of Corporations Public Access System

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(((H06000105064 3)))

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To:

Division of Corporations

Fax Number : (850) 205-0383 -

From:

: FOLEY & LARDNER Account Name Account Number: 072720000061 : (904)359-2000 Phone : (904)359-8700 Fax Number

		1985 – - January British (
E LOI	RIDA/FOREIGN LIMI	ITED LIABII	ITY CO.
CORPORATIO	Native Sun Natural Foods	of Mandarin, LL	Ċ.
CORF	Certificate of Status	0	
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VISION	Estimated Charge	\$155.00	A1/26
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Corporate Filing Menu

NO. 7629 904 260 3311

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: NATIVE SUN NATURAL FOODS OF MANDARIN, LLC.

ARTICLE II - Addresses:

The mailing address of the principal office of the Limited Liability Company is: Post Office Box 56227, Jacksonville, FL 32241

The street address of the principal office of the Limited Liability Company is: 10000 San Jose Boulevard, Jacksonville, FL 32257

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

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

Auron D. Gottlieb

Name

10000 San Jose Boulevard

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

Jacksonville, Florida 32257

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 completel 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.

Agron D. Gottlieb

(An additional article must be added if an effective date is requested)

Signature of a melither 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.)

Auron D. Gottlieb, Anthorized Representative
Typed or printed name of signes

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) SECRETAIN STATE
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REVISED 11/11/02

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