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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

ACCOUNT Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

Fax Number : (305)633-9696

FLQRIDA/FOREIGN LIMITED LIABILITY CO.

smith groceries llc

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Electronic Filing Menu Corporate Filing Menu

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ARTICLES OF ORGANIZATION OF SMITH GROCERIES LLC A Florida Limited Liability Company

ARTICLE I-NAME

The name of the Limited Liability Company is:

SMITH GROCERIES LLC

ARTICLE II-ADDRESS:

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

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

701 SW 12" AVENUE DANIA, FL. 33004.

701 SW 12^{TR} AVENUE DANIA, FL. 33004.

ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent age:

SAL SINAWI

701 SW 12TH AVENUE FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)

DANIA, FLORIDA 33004 CITY, STATE, AND ZIP 06 SEP 19 AM 9: 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REDISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHERAGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFOMANCE 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 SIGNATURE

HO6000231234

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ARTICLE IV-MANAGEMENT/MEMBER(5):

The name(s) and address (es) of each Manager or Managing Member is as follows:

Title:	Name and address:
MGR= Manager MGR= Manager	•
MGR= SAL SINAWI	701 S.W 12 TH AVENUE DANIA, FL. 33004.
(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.) 06 SEP 19 AH 9: 31
SECRETARY OF STATE
AND AHASSEE, FLORIDA

SAL SINAWI
Typed or printed name of signed

H06000231234