

L06000094 258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



100079799651

09/27/06--01002--007 **250.00

RECEIVED

06 SEP 26 PM 3:57

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

06 SEP 26 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FILED
06 SEP 26 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NW Chiquita-Trafalgar, LLC

- ☐ Art of Inc. File_____
- ☐ LTD Partnership File_____
- ☐ Foreign Corp. File_____
- ☒ L.C. File_____
- ☐ Fictitious Name File_____
- ☐ Trade/Service Mark_____
- ☐ Merger File_____
- ☐ Art. of Amend. File_____
- ☐ RA Resignation_____
- ☐ Dissolution / Withdrawal_____
- ☐ Annual Report / Reinstatement_____
- ☐ Cert. Copy_____
- ☒ Photo Copy_____
- ☐ Certificate of Good Standing_____
- ☐ Certificate of Status_____
- ☐ Certificate of Fictitious Name_____
- ☐ Corp Record Search_____
- ☐ Officer Search_____
- ☐ Fictitious Search_____
- ☐ Fictitious Owner Search_____
- ☐ Vehicle Search_____
- ☐ Driving Record_____
- ☐ UCC 1 or 3 File_____
- ☐ UCC 11 Search_____
- ☐ UCC 11 Retrieval_____
- ☐ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

9/26/06 2:52

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
06 SEP 26 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I: Name:

The name of the limited liability company is: **NW Chiquita-Trafalgar, LLC**

ARTICLE II: Address:

The mailing address and street address of the principal office of the limited liability company is:

NW Chiquita-Trafalgar, LLC
3613 Del Prado Blvd.
Cape Coral, FL 33904

ARTICLE III: Registered Agent:

The name and Florida street address of the limited liability company registered agent is:

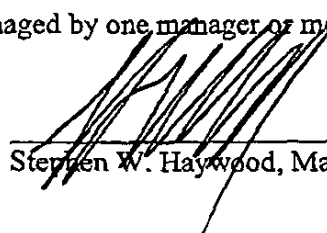
Name: Stephen W. Haywood
Address: 3613 Del Prado Blvd.
Cape Coral, FL 33904

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designed 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 in Chapter 608, F.S.


Stephen W. Haywood, Registered Agent

ARTICLE IV: Management:

The Limited Liability Company is to be managed by one manager or more and is therefore, a manager-managed company.


Stephen W. Haywood, Managing Member