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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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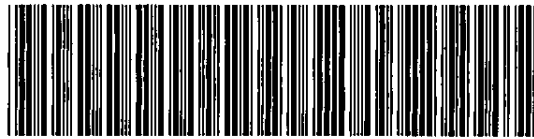
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Culligan MAR 13 2007

LAW OFFICES OF
STEPHEN D. SPANG, P.C.

540 Main Street, Suite 11 • Post Office Box 575
Winchester, Massachusetts 01890

Stephen D. Spang
Sabrina A. Harmon

Telephone 781 721-9292
Facsimile 781 721-5544

March 9, 2007

FEDEX OVERNIGHT
Tracking No. 8600 5802 4776

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Suncoast Donuts, LLC

Dear Sir or Madam:

Enclosed please find a Cover Letter Form, Articles of Organization, Consent to Use of Name, and a check payable to the Florida Department of State in the amount of \$125.00 representing the filing fee for the Articles of Organization for the above-referenced limited liability company.

Please issue a letter of acknowledgment upon registration and return it to me. Thank you for your assistance in this matter. Please call me if you have any questions.

Sincerely,



Stephen D. Spang

SDS/jl
Enclosures
cc: Nicholas A. Leo

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Suncoast Donuts, LLC
(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:

Stephen D. Spang, Esq.,

(Name of Person)

Stephen D. Spang, P.C.

(Firm/Company)

P.O. Box 575

(Address)

Winchester, MA 01890

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen D. Spang, Esq.,

(Name of Person)

at (781) 721-9292

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CONSENT TO USE OF NAME

The undersigned, on behalf of SUNCOAST DONUTS, INC., a Florida corporation, hereby consent to the use of the name SUNCOAST DONUTS, LLC, as a Florida limited liability company, as set forth in the proposed Articles of Organization marked as Exhibit "A" hereto.

Dated: March 1, 2007

SUNCOAST DONUTS, INC.

A handwritten signature in black ink, appearing to read "V. R. Leo", written over a horizontal line.

Vincent R. Leo, President

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Suncoast Donuts, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

5421 Little Road

New Port Richey, FL 34655-1107

Mailing Address:

517 Concord Avenue

Cambridge, MA 02138

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Suncoast Donuts, Inc.

Name

5421 Little Road

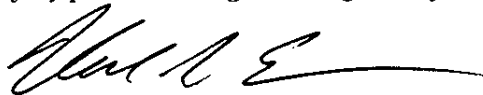
Florida street address (P.O. Box **NOT** acceptable)

New Port Richey FL 34655-1107

City, State, and Zip

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TALLAHASSEE, FLORIDA

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, F.S..



Registered Agent's Signature (REQUIRED)
Vincent R. Leo, President

(CONTINUED)

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:

MGR

Nicholas A. Leo

517 Concord Avenue

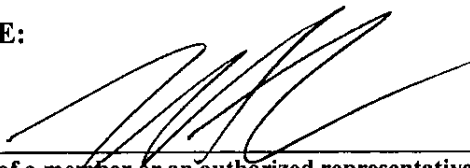
Cambridge, MA 02138

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Nicholas A. Leo, Manager

Typed or printed name of signee

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07 MAR 12 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)