

LO7000046397Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (205) 599-0839
Fax Number : (205) 716-03462007 MAY - 1 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****FOREST DISCOUNT FOODS., LLC.**

Certificate of Status	0
Certified Copy	1
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LO7-46397
5/1/2007

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

ARTICLE I – Name:

The name of the Limited Liability Company is:

FOREST DISCOUNT FOODS, LLC.

ARTICLE II – Address:

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

Principle Office Address:

Mailing Address:

2967 SE 48TH ST

2967 SE 48TH ST

OCALA, FL 34480

OCALA, FL 34480

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

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

BENNETT LAX

Name

2967 SE 48TH ST

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

OCALA, FL 34480

City, State, and Zip

Having been named as registered agent and to accept service of process for above stated limited liability company as 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, Florida Statutes.


Registered Agent's Signature

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

MGRM

BENNETT LAY
2967 SE 48TH ST
OCALA, FL 34480

MEMBER

DUSTIN LAY
3482 SE 137TH ST
SUMMERFIELD, FL 34491

(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 penalties of perjury that the facts stated herein are true.)

BENNETT LAY
Typed or printed name of signer

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