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SECRETARY OF STATE
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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Foragi	ng Ahead, L.L.C.		
SUBJECT:		ited Liability Company)	
The enclosed Articles of	f Organization and fee(s) are	e submitted for filing.	
Please return all corresp	ondence concerning this mat	atter to the following:	
Susan Ma	rie Moore		
		(Name of Person)	
Foraging A	Ahead, L.L.C.		
		(Firm/Company)	
4058 NW	13th Avenue		
<u> </u>		(Address)	
Gainesville	e, FL 32605		
<u> </u>	, (Ci	City/State and Zip Code)	
For further information	concerning this matter, pleas	se call:	
Susan Marie M	1oore	at 352 371-4180	
(Name	of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enc	ıs &
	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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	s:	
Foraging Ahead, L.L.C.		
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liability Company i	is:
Principal Office Address:	Mailing Address:	
4058 NW 13th Avenue	4058 NW 13th Avenue	
Gainesville, FL 32605	Gainesville, FL 32605	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	gistered Agent. You must designate an individual or another	
The name and the Florida street address of the	e registered agent are:	CATALOG S
Susan Marie Moore		The state of the s
Nam	ma P	
4058 NW 13th Ave		
Florida street a	nddress (P.O. Box NOT acceptable)	
Gainesville, FL 326	305 _L	
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 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 (REOLIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Mar	nager Ianaging Member	Name and Address:		
	ianaging Member	Katherine Marie Znamirowski		•
MGRM		4058 NW 13th Avenue		
		Gainesville, FL 32605		
MGRM		Susan Marie Moore		
WGRW		4058 NW 13th Avenue	 	
		Gainesville, FL 32605		
		Cultivating 12 October		
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(Use attachme	nt if necessary)	•		
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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)