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(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
(=	-y- = - 	- ·· ,
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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B. KOHR

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EXAMINER

COVER LETTER

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TO: Registration Division of C			
SUBJECT: Sunda	ay's Best and More	9	
	(Name of Limi	ted Liability Company)	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	080
Please return all corres	pondence concerning this ma	tter to the following:	
Clayton A	. Cowart		The second second
***************************************		(Name of Person)	
Sunday's	Best and More		922
		(Firm/Company)	T.
357-A Ha	vendale Blvd.		
		(Address)	
Auburnda	ile, Florida 33823		
	(Ci	ty/State and Zip Code)	
For further information	concerning this matter, pleas	se call:	
Clayton A. Co	wart	at (863) 595-56	42
(Nam	e of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF ORGANIZATION FOR FI ARTICLE I - Name:	ORIDA LIVITED LIABILITY COMPANY
The name of the Limited Liability Company is:	
Sunday's Best and More, LLC	
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is
·	
Principal Office Address:	Mailing Address:
357-A Havendale Bivd.	357-A Havendale Blvd.
Auburndale, FL. 33823	Auburndale, Fl. 33823
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered)	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	tered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r Kruk & Dough, PL	tered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	tered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r Kruk & Dough, PL Name 4927 Southfork Drive	ered Agent. You must designate an individual or another egistered agent are:
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(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r Kruk & Dough, PL Name 4927 Southfork Drive Florida street add	egistered agent are: egistered agent are: egistered agent are: fress (P.O. Box <u>NOT</u> acceptable)

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

MOKIVI — IVIA	naging Member	
MGRM		Clayton A. Cowart
		357-A Havendale Blvd.
		Auburndaie, FL. 33823
MGR		Anthony A. Brown
		357-A Havendale Blvd.
		Auburndale, FL 33823
(Use attachmen	t if necessary)	
	sted, the date must	ne date of filing: (OPTION be specific and cannot be more than five business da
	IGNATURE:	

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)

Clayton A. Cowart

that the facts stated herein are true.)

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee