

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000144681 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620

: (608)827-5300

Fax Number

: (608)827-5501



RIDA/FOREIGN LIMITED LIABILITY CO.

MecaFresh MPS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

D. BRUCE

JUN 18 2009

EXAMINER

Electronic Filing Monu

Corporate Filing Menu

Help

FAX AUDIT # H09000144681 3

ARTICLES OF ORGANIZATION MecaFresh MPS. LLC

ARTICLE I

NAME

The name of the limited liability company shall be: MecaFresh MPS, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 4203 SE Federal Hwy, Stuart, Florida 34997.

INITIAL REGISTERED AGENT & STREET ADDRESS ARTICLE III

The name and address of the initial registered agent is: Business Filings Incorporated, 120 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County Leon.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V **MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Todd Paul, 1840 Oak Ave Suite 110, Evanston, Illinois 60201

Date: June 16, 2009

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

(608) 827-5300

FAX AUDIT # H09000144681 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: MecaFresh MPS, LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suité 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Mark Williams, A.V.P. Business Filings Incorporated

Date: June 16, 2009

