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(Requestor's Name)	•	
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PICK-UP WAIT MAIL		
(Business Entity Name)		<i>,,,,,</i>
(Document Number)	, · · ·	. تا مختوب
Certified Copiese Certificates of Status <u>a</u>	(1)	. •
Special Instructions to Filing Officer:		`
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EXAMINER



November 3, 2009

REX HARRIS PO BOX 3503 HAINES CITY, FL 33845

SUBJECT: THE HARRIS FOOD COMPANY, LLC

Ref. Number: W09000048813

We have received your document for THE HARRIS FOOD COMPANY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 609A00034656

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: THE		COD ComPAN' Liability Company	4 LLC
The enclosed Articles o	f Organization and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Rex D. H	HARRIS	
	N	lame of Person	·
	F	Firm/Company	
79	BOX 350	3	THE NOV -L
_ HAI	NES CITY,	FL 33845 State and Zip Code	SECOND AND
		State and Zip Code OTMAIL COM future annual report notification)	AN 8: 45
For further information	concerning this matter, please of	ali:	
Z 5X Name	D HARRIS of Person	at (863) 206- Area Code & Daytime Tele	8131 phone Number
Enclosed is a check for	or 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 C	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

		COMPANY,	LLC.")		
ARTICLE II - Address: The mailing address and street add	lress of the princ	ipal office of the Lin	nited Liability	Company	y is:
Principal Office Address:	<u>N</u>	<u> failing Address:</u>			
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registra	as its own Registered	HAINES CLT FL 33845 ffice, & Registered			manager and a second a second and a second and a second and a second and a second a
	otanad agant ana	ć. Ž	- C	*crass	
The name and the Florida street ad 26x	_ را	-LL15	- -		
380 1	YIBLICK	CIR			
Florida stre	et address (P.O. Bo	x NOT acceptable)	-		
WINTER	HAVEN F	L 33881	_		
	City, State, and 2	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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	REX HARRIS
	380 NIBLICK CIR WINTER HAVEN FL 33881
MGRM	KIMBERLY BASS
·	380 NIBLICK CIR
MGRM	BRANDON BASS
	380 NIBLICK CIR WINTER HAVEN FL 33881
·	
(Use attachment if necessary)	
CLE V: Effective date, if other than the dat	e of filing: (OPTIONAL)
effective date is listed, the date must be sp 90 days after the date of filing.)	pecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member.
	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury are true.)
2ex D	HARRIS
Typed Filing Fees:	or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)