L10000071690

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400182934374

07/06/10--01027--029 **155.00

FILED

10 JUL-6 PM 2:51

SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE
AND A SECRETARY OF STATE
S

Carol Allison Document Service 2650 Baywood Drive Titusville, Florida 32780

June 30, 2010

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: CANAVERAL PERISHABLE LOGISTICS, LLC

Enclosed please find one original and one copy of Articles of Organization for the above LLC. Enclosed check for \$155.00 for the following fees.

Filing Fee Certified Copy

\$125.00

\$30.00

Please return all correspondence concerning this matter to the following:

Carol Allison Document Service 2650 Baywood Drive Titusville, Florida 32780 321.480.9789

allion

Sincerely,

Carol Allison

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name of Limited Liability Company is:

CANAVERAL PERISHABLE LOGISTICS, LLC

ARTICLE II

Mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4145 Fay Blvd Cocoa, Fl. 32927

Mailing Address:

4145 Fay Blvd Cocoa, Fl. 32927 FILED

10 JUL -6 PH 2: 51

SECRETARY OF STATE

SECRETARY OF STATE

ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature:

(You must designate an individual or another business with an active Florida registration)

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

Brittany A. Robberecht 520 Espanol Ave Cocoa, Fl. 32927

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 heareby 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.

Exitary A. Robberent 06/30/2010

ARTICLE IV Manager or Managing Member(s) The name and address of each	s): Manager or Managing Member is as follows:
<u>Title</u> "MGR"≕Manager "MGRM"=Managing Member	Name and Address
MGRM	Brittany A. Robberecht 520 Espanol Ave Cocoa, Fl. 32927
ARTICLE V (Optional)	
Effective date, if other than the of (If an effective date is listed, the five business days prior to or 90)	date must be specific and cannot be more than

REQUIRED SIGNATURE:

Brittany A. Robberecht 06/30/10

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein and frue 5