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(((H11000175833 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255 Phone

: (305)634-3694

Fax Number

: (305) 633-9696

Enter the email address for this business entity to be used for functional report mailings. Enter only one email address please. annual report maili

ings.	Enter	only	one	email	address	please.

FLORIDA LIMITED LIABILITY CO.

sno cone paradise, llc

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JUL 0 8 2011

EXAMINER

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EFFECTIVE DATE 107/

https://efile.sunbiz.org/scripts/efilcovr.exe

7/7/2011

EMPIRE CORP KIT

21:62 1102/90/40 3026333696

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company is:

SNO CONE PARADISE, LLC

ARTICLE II- Address:

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

Principal Office Address:

Mailing Address:

7660 NW 12 Court Plantation, FL 33322 7660 NW 12 Court Plantation, FL 33322

ARTICLE III- Registered Agent

Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the Registered Agent are:

Norman A. Lobban

Name

4448 Inventory Boulevard

Florida street address

Lauderhill, FL 33319

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

ARTICLE IV- Purpose

EMPIRE CORP KIT

Any and all lawful business.

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EFFECTIVE DATE 07/01/11

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21:62 1102/90/20

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ARTICLE V Manager(s) or Managing Member(s)

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

Title

Name and Address:

"MGR"= Manager

"MGRM"= Managing Member

MGR_

Nannette A. Smith-Simpson

7660 NW 12th Court

Plantation, FL 33322

MGRM

Rohan Simpson 7660 NW 12th Court Plantation, FL 33322

Signature of a Member or an authorized representative of a member

(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 are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Nannette A. Smith-Simpson
Typed Name

ARTICLE VI-EFFECTIVE DATE

The effective date for this Limited Liability Company shall be July 01, 2011

Registered Agent Signature:

Tonnan A. Lobban

TILED

11 JUL -7 AM 9: 24

SECRETARY OF STATE
PARL ARSSEE, FLORID

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