

L11000090100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

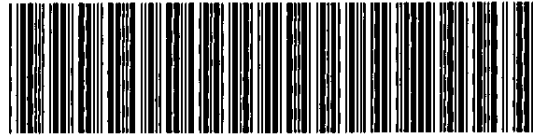
Special Instructions to Filing Officer:

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B. KOHR

AUG 5 2011

EXAMINER



700209815887

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2011 AUG -5 AM 10:41

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

EFFECTIVE DATE 8/4/2011

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG -5 AM 11:05



CORPORATION SERVICE COMPANY

EFFECTIVE DATE

8/4/2011

ACCOUNT NO. : I20000000195

REFERENCE : 870876 7110815

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 125.00

FILED STATE
SECRETARY OF COMMERCE
DIVISION OF CORPORATIONS
11 AUG -5 AM 11:05

ORDER DATE : August 5, 2011

ORDER TIME : 10:14 AM

ORDER NO. : 870876-005

CUSTOMER NO: 7110815

DOMESTIC FILING

NAME: HEALTHY & TASTY VENTURES 102,
LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace - EXT. 2928

EXAMINER'S INITIALS: _____

EFFECTIVE DATE

8/4/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Healthy & Tasty Ventures 102, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

20969 Delagado Terrace
Boca Raton, Florida 33433

Mailing Address:

20969 Delagado Terrace
Boca Raton, Florida 33433

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation Service Company

Name

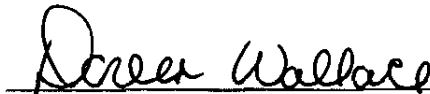
1201 Hays Street

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32301

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.



Doreen Wallace

Registered Agent's Signature (REQUIRED) Assistant Vice President

(CONTINUED)

FILED STATE
SECRETARY OF CORPORATIONS
11 AUG - 5 11:11:05

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

"MGRM" = Managing Member

Name and Address:

MGR

Ghazi Hajj

20969 Delagado Terrace

Boca Raton, Florida 33433

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 4, 2011. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

Ghazi Hajj

Typed or printed name of signee

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)