

L12000003954

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
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FLORIDA LIMITED LIABILITY CO.  
RLI FOODS LLC

Certificate of Status	0
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G. MCLEOD

JAN 10 2012

EXAMINER

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**  
In compliance with Chapter 608, F.S.

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**ARTICLE I NAME**

The name of the Limited Liability Company is:

RLI FOODS LLC

**ARTICLE II ADDRESS**

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

1820 NW 179TH STREET  
MIAMI GARDENS, FL 33056

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

CHEFR LI LLC  
1820 NW 179 ST  
MIAMI GARDENS, FL 33056

Having been named as registered agent 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.

X   
\_\_\_\_\_  
CHEFR LI LLC / Registered Agent's signature

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER  
CHEFRLI LLC  
1820 NW 179 ST  
MIAMI GARDENS, FL 33056

.....

X 

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.

CHEFRLI LLC

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