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FLORIDA LIMITED LIABILITY CO.

A Taste of Sofia's, LLC

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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:

A TASTE OF SOFIA'S, LLC

ARTICLE II ADDRESS

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

1432 S KINGSWAY ROAD
SEFFNER, FLORIDA 33584

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

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

SUSAN M STANLEY
1815 E DIANA STREET
TAMPA, FLORIDA 33610

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 Susan Stanley
SUSAN M STANLEY / 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

MANAGING MEMBER

SUSAN M STANLEY

1432 S KINGSWAY ROAD

SEFFNER, FLORIDA 33584

MANAGING MEMBER

SALLY STANLEY

1432 S KINGSWAY ROAD

SEFFNER, FLORIDA 33584

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TALLAHASSEE, FLORIDA

.....

x Susan M. Stanley

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.

SUSAN M STANLEY

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