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·
(Requestor's Name)
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PICK-UP WAIT MAIL
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2012 AUG -9 AM II: 12

J. SAULSBERRY EXAMINER

AUG 10 2012

COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT: Yulee Sauce Compan	v		2012 AUG-9 AH 11: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDE
	ited Liability Compa	any	FC P
			超ら
The enclosed Articles of Organization and fee(s) are	e submitted for filing	g.	SSA G
Please return all correspondence concerning this ma	atter to the following	r•	元 至
		,-	FLO FLO
Jay Miller			RIE 7
	Name of Person		72
Yulee Sauce Company			
	Firm/Company		
05040 15			
85618 Joann rd	A 11		
	Address		
Yulee, Florida 32097			
C	ity/State and Zip Code	;	HOG 99 ANIIII 1 22
jayhmiller@comcast.net			THE PARTY
E-mail address: (to be used	for future annual repo	ort notification)	
For further information concerning this matter, please	se call:		5E 12
Jay Miller	at (904	849-7864	
Name of Person	at (& Daytime Telephor	ne Number
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$130.00 Filing Fee &	\$155.00 Filin	o Fee & S	160.00 Filing Fee,
\$125.00 Filing Fee & Certificate of Status	Certified Co	С	ertificate of Status &
	(additional copy		ertified Copy additional copy is enclosed)
		,4	admonar copy is enclosed,
Mailing Address		ourier Address	
Registration Section Division of Corporations		on Section of Corporations	
P.O. Box 6327	Clifton B	uilding	
Tallahassee, FL 32314		cutive Center Circl ee, FL 32301	e

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited I	iability Compa	any is:			
Yulee Sauce Co	<u> </u>				
(Must end wi	th the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and s	reet address of	f the principal office of the Limited L	iability Co	mpan	y is:
Principal Office Address	<u>:</u>	Mailing Address:			
85618 Joann Rd Yulee FL	32097	85618 Joann Rd Yulee FL 3	2097		
	annot serve as its ow	istered Office, & Registered Agent' vn Registered Agent. You must designate an indiv		her	
The name and the Florida	street address o	of the registered agent are:	VLT. SEC	912	
Jay N	/liller		CRET LAHA	2012 AUG	
	······································	Name	ARY SSE	5	-
856 ⁻	18 Joann	Rd	<u> </u>		Ti
	Florida st	treet address (P.O. Box NOT acceptable))F STATE		,
Yulee		_{FL} 32097	Ď.Ħ	州1:12	
	(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 (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGR	Jay H Miller
	85618 Joann rd
	Yulee FL 32097
	
(Use attachment if necessar	•
ffective date is listed, the da	ner than the date of filing: (OPTIONAl ate must be specific and cannot be more than five business day g.)
	ate must be specific and cannot be more than five business day g.)
ffective date is listed, the date of filing days after the date of filing REQUIRED SIGNATUR	ate must be specific and cannot be more than five business day g.) RE:
ffective date is listed, the date of filing days after the date of filing required SIGNATUR Signature	ate must be specific and cannot be more than five business day g.) EE: Of a/member or an authorized representative of a member.
ffective date is listed, the date of filing days after the date of filing from the days after the date of filing from the days after the days af	ate must be specific and cannot be more than five business day g.) RE:
ffective date is listed, the date of filing days after the date of filing from the filing signature. Signature (In accordance with constitutes an affirm 1 am aware that any constitutes a third of the file of the file.)	Attended to the specific and cannot be more than five business day g.) AE: Of a member or an authorized representative of a member. In section 608.408(3), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true. In the section of the penalties of perjury that the facts stated herein are true. In the section of this document of State degree felony as provided for in s.817.155, F.S.)
ffective date is listed, the date of filing A days after the date of filing REQUIRED SIGNATUR Signature (In accordance with constitutes an affirm 1 am aware that any constitutes a third of	ate must be specific and cannot be more than five business day g.) AE: Of a member or an authorized representative of a member. In section 608.408(3), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true, y false information submitted in a document to the Department of State
ffective date is listed, the date of filing days after the date of filing from the filing signature. Signature (In accordance with constitutes an affirm 1 am aware that any constitutes a third of the file of the file.)	ate must be specific and cannot be more than five business day g.) AE: Of a member or an authorized representative of a member. In section 608.408(3), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true. In the section of the section of this document mation under the penalties of perjury that the facts stated herein are true. In the section of this document was a provided for in s.817.155, F.S.) Miller

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)