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B. BOSTICK

NOV 2 8 2012

**EXAMINER** 



ACCOUNT NO. : 12000000195

REFERENCE: 433324

AUTHORIZATION :

COST LIMIT :

ORDER DATE: November 26, 2012

ORDER TIME : 9:02 AM

ORDER NO. : 433324-005

CUSTOMER NO: 4305390

DOMESTIC FILING

NAME: SUGAR HOLDINGS, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 52949

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company i	s:			
SUGAR HOLDINGS, LLC				
(Must end with the words "Limited Lial	hility Company "LT C " or "LLC")	<del></del>		
(Mids) and with the words. Elithical Dial	offiny Company. E.E.O. W. 1335.			
ARTICLE II - Address:				
The mailing address and street address of the	principal office of the Limited	Liability Comp	nany i	s:
Principal Office Address:	Mailing Address:			
870 South Collier Blvd. 1503	870 South Collier Blvd.	Aut 502		
Marco Island, FL 34145	Marco Island, FL 34145	, W(1>6)		
Maico Island, PE 34143	Marco Island, 112 34143			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)	ed Office, & Registered Agen istered Agent. You must designate an ind	t's Signature: lividual or another		
The name and the Florida street address of the	e registered agent are:	SECF AULA	12 NOV 27	
Thaddeus Jachera		<b>£</b> M	9	
Nam	ne	XSI VSSI	27	
870 South Collier Blvd.		[H <sub>€</sub>	<b>&gt;</b>	
Florida street a	ddress (P.O. Box NOT acceptable)	⋣,	<u> </u>	
Marco Island	FL_34145	025	AM 10: 31	
City,	State, and Zip	<b>,</b> €7.	<u>3</u>	
		10,000		_

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 um familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

l'haddeus Jachera

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Thaddeus Jachera  870 South Collier Blvd.
<del></del>	- Augusta Augu
	A SO
(Use attachment if necessary)	FLORIDA RICA ABA
LE V: Effective date, if other than th	e date of filing: (OPTIO
	ne specific and carmot be more than tive business t
days after the date of filing.)	ne specific and carmot be more than tive business t
days after the date of filing.)  REQUIRED SIGNATURE:	ber or an authorized representative of a member.
(In accordance with section 6) constitutes an affirmation und I am aware that any false info	Yachen

\$125.00 Filing Fee for Articles of Organization and Designation

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