#2307 P.001/003

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000004831 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305) 552-5973 Fax Number : (305) 220-1440

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO.

SWEET TOP, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu Corporate Filing Menu

Help

JAN - 8 2013

H13000004831

ARTICLES OF ORGANIZATION FOR	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Compar	y is:
Sweet	Top., 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 mailing address and street address and stre	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10720 N.W. 66 ST.	10720 D.W. 66 ST:
ABT. 211, DORATEL 33178	1672 0.00. 00 30 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	tered Office, & Registered Agent's Signature: Registered Agent. You must designate as individual or snother If the registered agent are:
1	
77.00	Sandoval.
10720 N.W.	66 87. AGT. 211.
Florida str	66 87. A67. 211. pet address (P.O. Box <u>NOT</u> acceptable)
Dool.	FL 33/78 State, and Zip
City,	State, and Zip
liability company at the place designat registered agent and agree to act in this c statutes relating to the proper and comp	nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S
	~ () - =
- Cli	$\omega \leq \omega$
Registered Agent's	s Signature (REQUIRED)
	- 47 - 02
· ·	

(CONTINUED)
Page 1 of 2

H13000004831

H13000004831

MA SANDOVA 120 NW 60 ST A RAL FL 33178	<u>L</u>
: (OP I cannot be more than five busin	
toll .	
), Florida Statutes, the execution ation under the penalties of perjury	
), Florida Statutes, the execution ation under the penalties of perjury	13 JAN
3 (%)	VDOVAL