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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT 5 MAIL (Business Entity Name) (Document Number) Certificates of Status _ Certified Copies _____ Special Instructions to Filing Officer:

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EFFECTIVE DATE 01-15-13

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SLUNC FARY OF STATE
TALLAHASSEE, FLORID

B. BOSTICK

JAN 2 2 2013

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Sugar, Eggs & Butter, LLC. Name of Limited Liability Company
The enc	losed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
_	Milena C. DeJesus
	Name of Person
_	
	Firm/Company
	P.O. Box 7782
-	Address
_	P.O. Box 7782 Address Delray Beach, FL 33482-7782 City/State and Zip Code
	City/State and Zip Code
-	City/State and Zip Code Sugareas and butter annual report notification Sugareas and butter annual report notification
For furt	her information concerning this matter, please call:
1	Milena DeJesus at 561 , 727-5039 📆 🖫
	Milena DeJesus at 561 727 - 5039 F5 P Area Code & Daytime Telephone Number 720 08
Enclose	ed is a check for the following amount:
□\$125.0	Of Filing Fee \$\ \times \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Sugar, Eggs & Butter, LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "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 principal office of the Limited Liability Company is
Principal Office Address: Mailing Address:
5610 W. Atlantic Ave # 106 Delray Beach, FL 33484 Delray Beach, FL 33484 Delray Beach, FL 33482
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Milena C. De Jews Name PH Name Name
Having been named as registered agent and to accept service of process for the above stated limite 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.

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
N/A	N/A		
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>January 15, 2013</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Milena C. DeTegus

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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