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SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sun Shine Seasonings, LLC. Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Debra Moore Name of Person
Sunshine Seasonings, UC Firm/Company
765 5 Fed Huy # 296 Address
City/State and Zip Code City/State and Zip Code Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee S155.00 Filing Fee S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



January 24, 2014

DEBRA MOORE 265 S FED HWY #296 DEERFIELD BEACH, FL 33441

SUBJECT: SUNSHINE SPICE CO., LLC

Ref. Number: W14000004819

We have received your document for SUNSHINE SPICE CO., LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P95000086746 (SUNSHINE SPICE, CORP).

The name of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6951.

JENNA D HARRIS Regulatory Specialist II Letter Number: 614A00001637

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	v.
The name of the Limited Liability Company is:	
Instine Se	Limited Liabinay Company, "L.L.C.," or "LLC.")
(Must end with the words:	Limited Liabinity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
265 5 701 Hwy	SAnc
Deerfield Bub 33471	<u></u>
ARTICLE III - Registered Agent. Registered (The Limited Liability Company cannot serve as another business entity with an active Florida re The name and the Florida street address of the re	its own Registered Agent. You must designate an individual or gistration.)
	Name
Florida street address (F	O. Box NOT acceptable)
Ady Lake	7\ FL 32159 Zip
the place designated in this certificate, I hereb capacity. I further agree to comply with the pro-	ccept service of process for the above stated limited liability company by accept the appointment as registered agent and agree to act in this orisions of all statutes relating to the proper and complete performance of the obligations of my position as registered agent as provided for in

at Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

	Name and Address:
"MGR" = Manager An BR	Debra Moor
- 	265 5. Fed Hwy # 29
	Dec Cel 3 1 2 3 344
	Decritices Day, to 33-11
	The state of the s
Use attachment if necessary)	
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Signature of a mem (In accordance with section 605.) constitutes an affirmation under t	ber or an authorized representative of a member. 0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
Signature of a memical constitutes an affirmation under the I am aware that any false information.	ber or an authorized representative of a member. 0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State
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ARTICLE IV-

Page 2 of 2