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Florida Department of State
Division of Corporations
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H14000092452

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To:

Division of Corporations
Fax Number : (850) 617-6383

EFFECTIVE DATE 04-17-14

From:

Account Name : ARLENE F. AUSTIN, P.A.
Account Number : I20000000066
Phone : (239) 514-8211
Fax Number : (239) 514-4618

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

Email Address: afaustin@att.net

FLORIDA LIMITED LIABILITY CO.
A Spoonful of Sugar LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

B. BOSTICK

APR 21 2014

EXAMINER

RECEIVED

14 APR 21 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H140000924523

**ARTICLES OF ORGANIZATION OF
A SPOONFUL OF SUGAR, LLC
A LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name & Address

The name of the Limited Liability Company is: A SPOONFUL OF SUGAR, LLC

The mailing address and street address of the principal office of the Limited Liability Company is:

588 Ridge Drive
Naples, FL 34108

ARTICLE II — Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE III — Purpose:

The purpose for the Limited Liability Company shall be to operate a specialty bakery business and to engage in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

ARTICLE IV — Authorized Members:

The Names and Addresses of each person authorized to manage and control the Limited Liability Company are:

Michelle L. Gray
Christina E. Gray
Thomas R. Gray
588 Ridge Drive
Naples, FL 34108

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ARTICLE V — Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be by consent of a majority of the members.

ARTICLE VI — Members' Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be by consent of a majority of the members.

ARTICLE VII — Effective Date

The term of this company shall be effective on April 17, 2014.

ARTICLE VIII - Resident Agent

The name of the initial registered agent and the Florida street address of the registered agent and office shall be:

Arlene F. Austin, Esq.
6312 Trail Blvd.
Naples, FL 34108

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization and acknowledged them to be their free act on this 17th day of April, 2014.

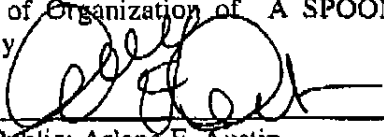

Christina E. Gray, AMBR


Michelle L. Gray, AMBR


Thomas R. Gray, AMBR

State of Florida
County of Collier

On April 17, 2014, Christina E. Gray, Thomas R. Gray, Michelle L. Gray, [XX] who are all personally known to me or [] who each produced a Florida driver's license as identification and they personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of A SPOONFUL OF SUGAR, LLC, a Florida Limited Liability Company


Notary Public: Arlene F. Austin
Commission Expiration Date & Commission Number:



ARLENE F. AUSTIN
MY COMMISSION # EE 113884
EXPIRES: August 8, 2016
Bonded Thru Budget Notary Services

(SEAL)

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0114 OR 605.0116, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

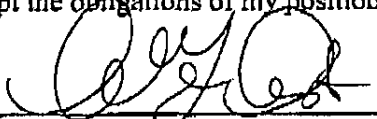
1. The name of the Limited Liability Company is:

A SPOONFUL OF SUGAR, LLC

2. The name and the Florida street address of the registered agent and registered office are:

Arlene F. Austin, Esq.
6312 Trail Blvd.
Naples, FL 34108

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.



Arlene F. Austin, Esq.
Registered Agent

State of Florida
County of Collier

On April 17, 2014, Arlene F. Austin, Esq., designated above as the individual who shall serve as the company's initial registered agent, is personally known to me and she personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of A Spoonful of Sugar, LLC, as registered agent.



Notary Public: Jessica Fisher



JESSICA FISHER
MY COMMISSION # FF 032600
EXPIRES: July 4, 2017
Bonded Thru Budget Notary Services

(Notary Public - Printed Or Typed Name)

Commission Expiration Date & Commission Number:

(SEAL)

H140000924523

APR-21-2014 MON 09:11 AM ARLENE F AUSTIN PA
650-017-5381

4/18/2014 11:25:09 AM

FAX NO. 2395144618

PAGE 1/001 Fax Server

P. 01



April 18, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ARLENE F. AUSTIN, P.A.

SUBJECT: A SPOONFUL OF SUGAR, LLC
REF: W14000024758

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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) 245-6051.

Barbara Bostick
Regulatory Specialist II

FAX Aud. #: H14000092452
Letter Number: 814A00008348

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TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314