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COVER LETTER

SUBJECT: Floridan Dessents 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:
Perette DeJean - Connady Name of Person
Floridan Dessets LLC Firm/Company
3418 SDTE Street West
Bradenton FL. 34209
City/State and Zip Code BAKER 6996 ADL COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Perette D. Cannada (941) 962-0964 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee \$ \$155.00 Filing Fee \$ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

TO:

Registration Section Division of Corporations

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

Street/Courier Address
Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Flordian Desserts 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:
3418 50th st. West 3418 50th st. West Bladenton, FL Bladenton, FL 34209
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: Perette De Jean-Cannady Name 3418 SOH St. West 23
Florida street address (P.O. Box NOT acceptable) Bladentzn FL 34209 City Zip
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 as provided for in Chapter 605, F.S
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	authorized to manage and control the Limited Liability Comp		
Title: "AMBR" = Authorized Member "MGR" = Manager "MGR R.	Name and Address: Perette Desteon - Co. 3418 SOLL St. Wes Braden Dn. Fl. 34	unned t	Bey
(Use attachment if necessary)			
RTICLE V: Effective date, if other than the dat an effective date is listed, the date must be s	te of filling:, (OPTIONAL) pedific and cannot be more than five business days prior to) oor 90 daysa	after
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RTICLE V: Effective date, if other than the date an effective date is listed, the date must be seedate of filing.) RTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a macordance with section 6 constitutes an affirmation und 1 arm aware that any false info	pecific and cannot be more than five business days prior to The Dean Council of the council of	SECHETARY O	