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DATE: 9/4/14

NAME: JNE CANDY CO., LLC

TYPE OF FILING: ARTICLES

COST: 155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: JNE CANDY CO., LLC Name of Liv	nited Liability Company	
The enclosed Articles of Organization and fee(s) at Please return all correspondence concerning this m		
Sharon K. Gray	Name of Person	
Triad Professional Services, LLC	Firm/Company	
1720 Windward Concourse, Ste. 3	90 Address	
Alpharetta, GA 30005	City/State and Zip Code	
E-mail address: (to be use For further information concerning this matter, plea	d for future annual report notifica use call:	ition)
Sharon K. Gray at C. Name of Person	770) 777-2091 Area Code Daytime Tel	lephone Number
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	☑\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Add	ress

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

ARTICLES OF ORGANIZATION OF JNE CANDY CO., LLC

ACCOUNTING OF THE SERVICES The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I --- Name:

The name of the limited liability company is JNU Candy Co., LLC thereinafter referred to as the "Company").

ARTICLE II - Address:

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

11767 Chateaubriand Avenue Orlando, FL 32836

ARTICLE III - Registered Agent:

The name and the Florida street address of the initial registered agent are:

NRAI Services, Inc. 1200 South Pine Island Road Plantation, FL 33324

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 \inf complete performance of my duties, and I am familiar with and accept the obligations of myly \hat{g} sition as regilizard algent as provided for in Chapter 605, F.S.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the Members and acknowledged them to be my act this 4th day of September, 2014.

Signature of authorized representative

(In accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I amaware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for m s.817.155, F.S.)

> Richard A. Bruner, Jr. Lsq Typed or printed name of signce.