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COVER LETTER

	on Section of Corporations		
SURJECT: SERG	GIO'S PRODUCE LLC		•
SOBILET. OLIV		nited Liability Company	
The enclosed Articl	les of Organization and fee(s) a	re submitted for filing.	
Please return all cor	rrespondence concerning this m	atter to the following:	
SERGI	O PAGES		
		Name of Person	
<u>SERGI</u>	O'S PRODUCE, LLC	·	
	•	Firm/Company	
<u>1403 S</u>	SWAN COURT		
		Address	
<u>KISSIM</u>	IMEE, FLORIDA 34759		
	C	City/State and Zip Code	
<u>PAGESSUAN</u>	IY@YAHOO.ES		
	E-mail address: (to be use	d for future annual report notifica	ation)
For further informat	tion concerning this matter, plea	ase call:	
SERGIO PAGES	at (4	107) 319-9148	
	ame of Person		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)

ì.

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

SERGIO'S PRODUCE, L	LC		
		ited Liability Company, "L.L.C.," or "LL	.C.")
ARTICLE II - Address:			•
	eet address of the princip	al office of the Limited Liability Compan	y is:
Principal Office Address:		Mailing Address:	
1403 SWAN COURT		1403 SWAN COURT	
KISSIMMEE, FL 34759 ARTICLE III - Registered The Limited Liability Com	pany cannot serve as its	ice, & Registered Agent's Signature: own Registered Agent. You must designate	te an individual or
ARTICLE III - Registered The Limited Liability Commonther business entity with	npany cannot serve as its of han active Florida registr	ice, & Registered Agent's Signature: own Registered Agent. You must designal ration.)	14 s SEC
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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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	SERGIO PAGES
	1403 SWAN COURT
	KISSIMMEE, FL 34759
	
(Use attachment if necessary)	As
•	e of filing: 10/23/2014 (OPTIONAL)
LE V: Effective date, if other than the date fective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 9
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REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor	ember or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. 25.0203 (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
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