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(Re	equestor's Name)	
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COVER LETTER

	ivision of Corporations		
SUBJECT	: Sutter's Distr	i bution LLC	
	Name of En	micd Liability Company	
The enclos	ed Articles of Organization and fee(s) a	re submitted for filing.	
Please retu	rn all correspondence concerning this m	natter to the following:	
	L. William	Yoder	
		Name of Person	
	Sytter's Tr	ansport LLC Firm/Company	IS F
		Firm/Company	놀림 吕 ㅠ
	6830 Richard	son Rd	38 日
		Address	
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	Sarasota, t	City/State and Zip Code	
			•
	59 Fo Frice	980 gmail.com	ation)
P C		•	
ror turtner	information concerning this matter, plea	ase can:	
	Name of Person at (_	94/ 37/-25 Area Code Daytime Tel	596 lephone Number
Enclosed is	s a check for the following amount:		
	ling Fee \$\Bigcup \\$130.00 \text{ 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 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Sutter's Distribut (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6830 Richardson Road Sarasota, FL 34240	6830 Richardson Road Sara sota, Fl 34240
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered a L. William Name	yoder 2
6830 Richardsor Florida street address (P.O. Box 1	** ***
<u>Sarasota</u> City	FL 34240 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)

 $Page \, 1 \, of \, 2$

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	A 1 - NAN
MGIR	Al Miller
	1807 par place
	Sarasota, FL 34240
MGRM	L. William Uoder
	6830 Richardson Rd.
	Sarasota FL 34240
	•
(Use attachment if necessary)	
E V: Effective date, if other than the ctive date is listed, the date must of filing.) E VI: Other provisions, if any.	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 d
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