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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H150000269013)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number: 120010000112 : (302)575~0875 : (302)5/5-1642 Fax Number

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

Email Address:

## FLORIDA LIMITED LIABILITY CO.

R & R Foods LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

B. BOSTICK

FEB - 3 2015

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EXAMINER

From: 302-575-1642

H15000026901 3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICI F.1 - Name:

The name of the Limited Liability Company is:

R & R Foods LLC		9 - 0 2 6 25
(Must end with the w	ords "Limited Liability Company, "L.L.C.,	
ARTICLE II - Address:	he principal office of the Limited Liability	205 205
the maiting address and street address of the	he brincipal office of the Philifed Figorith	2.7.7.
Principal Office Address:		5 E E
5783 Center Ring Rd.		
Sarasota, FL. 34243	Mailing Address:	رم بہ <sub>ن</sub> ح
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		~ co
		(,≟ <b>÷</b> )
		57 <b>5</b>
		<u>,</u>

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 Plorida registration.)

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

AGENTS AND	CORPORA	TIONS, INC.
300 FIFTH AVE		
NAPLES City	ΓL	34012 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..

Agents and Corporations, Inc.

Registered Agent's Signature (Required)

John L. Williams, President

(CONTINUED)

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The name and address of each person authorized to manage and control the Limited Liability Company

Title: "AMBR" - Authorized Men "MGR" = Manager	Name and Address:		
AMBR	RICK UKMAR 5783 Center ring rd Sarasota ,FL 34243		
AMBR	RICHARD GEORGE 7005 Mottie Rd. Gibsonton, Fl., 33534	2015 FEB	7
MGR	JULIE UKMAR 5783 Center ring rd Sarasota "FL 34243	-2 A 9	
MGR	JUDY GEORGE 7005 Mottle Rd. Gibsonton, FL. 33534	<b>2 1 5</b>	
(Use attachment if necessary		(ĐỊTIĐNAL)	
· · · · · · · · · · · · · · · · · · ·	nast be specific and cannot be more than five busines		er
CICLE VI: Other provisions, if any.			
HCLE VI: Other provisions, illuny.	01000		

Signature of a member or an authorized representative of a member. (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 am aware that any false information submitted in a document to the Department of State constitutes a third degree follows as provided for in s.817.155, F.S.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)