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T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CUPCAKES & MORE, LLC

Signature _____

Requested by: BA

7/23/15

Name _____

Date _____

Time _____

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____ Art of Inc. File _____
____ LTD Partnership File _____
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____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
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____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

ARTICLES OF ORGANIZATION
FOR
Cupcakes & More, LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **Cupcakes & More, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is **8303 Southwest 43rd Terrace, Gainesville, Florida, 32608**

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ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Your Capital Connection, Inc., 417 E.
Virginia St. Ste 1., Tallahassee, FL 32301**

ARTICLE IV: AUTHORIZED MEMBERS

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

**Susan Claire Stieglitz, Authorized Member, 8303 Southwest 43rd Terrace, Gainesville,
Florida, 32608**

The undersigned has executed these Articles of Organization for filing purposes this 23rd
day of July 2015.

"Your Capital Connection, Inc. by, Branden Allen, Client Representative"

/s/ Branden Allen

Authorized Representative

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

1. The name of the company is: Cupcakes & More, LLC

2. The name and address of the registered agent and office is:

Your Capital Connection, Inc.,
417 E. Virginia St. Ste 1., Tallahassee, Fl 32301

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.



Signature of Registered Agent

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