500014

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



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08/28/15--01009--010 **125.00

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COVER LETTER

	livision of Corporations				
SUDJECT	SUGAR BEACH EXPORTS LLC				
SOBJECT	Name of Limited Liability Company				
The enclos	sed Articles of Organization and fee(s) are submitted for filing.				
Please retu	irn'all correspondence concerning this matter to the following:				
	ROGER RAND				
	Name of Person				
	SUGAR BEACH EXPORTS LLC				
	Firm/Company				
	601 93RD STREET				
	Address				
	SURFSIDE, FLORIDA 33154				
	City/State and Zip Code ROGERRAND@BELLSOUTH.NET				
	E-mail address: (to be used for future annual report notification)				
For further	information concerning this matter, please call:				
	KRIS I DOUGHERTY 305 868-1333				
	Name of Person Area Code Daytime Telephone Number				
Enclosed	is a check for the following amount:				
\$125.00 F	Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)				
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liab	pility Company, "L.L.C.," or "LLC,")	
	·····, ·······, ·····, ··· ·· ·· · · ·	
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:	d
Principal Office Address:	Mailing Address:	- :
601 93RD STREET SURFSIDE, FL. 33154	SAME	117
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Regi another business entity with an active Florida registration.)	istered Agent. You must designate an individual or	* * * * * * * * * * * * * * * * * * *
The name and the Florida street address of the registered ager KRIS I. DOUGHERTY, O		

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..

State

City

(CONTINUED)

Zip

Page 1 of 2

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)