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Florida Department of State
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Account Number : 072731001155
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FLORIDA LIMITED LIABILITY CO.
Fernandez Family Pot, LLC

Certificate of Status	1
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**ARTICLES OF ORGANIZATION
OF
FERNANDEZ FAMILY POT, LLC**

The undersigned hereby organizes a limited liability company under the provisions of the Florida Revised Limited Liability Company Act, and pursuant to the following Articles of Organization:

ARTICLE 1

Name

The name of this limited liability company is Fernandez Family Pot, LLC (hereafter, the "Company").

ARTICLE 2

Effective Date

This Company shall have perpetual existence, commencing on the date that these Articles of Organization are filed with the Florida Department of State.

ARTICLE 3

Mailing Address and Principal Office

The mailing address and the street address of the principal office of the Company is 6112 North Florida Avenue, Tampa, Florida 33604.

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ARTICLE 4

Initial Registered Office and Agent

The street address of the initial registered office of this Company is 601 Bayshore Boulevard, Suite 700, Tampa, Florida 33606, and the name of the initial registered agent of this Company at that address is Leslie J. Barnett.

ARTICLE 5

Management of the Company

The Company is to be managed by one or more managers and is, therefore, a manager-managed limited liability company within the meaning of Section 605.0102(39) of the Act. The names and addresses of the initial managers are:

David B. Fernandez
6112 N. Florida Avenue
Tampa, FL 33604

Douglas B. Fernandez
6112 N. Florida Avenue
Tampa, FL 33604

Miranda F. Jones
6112 N. Florida Avenue
Tampa, FL 33604

ARTICLE 6

Indemnification

The Company shall indemnify its members to the fullest extent authorized by law.

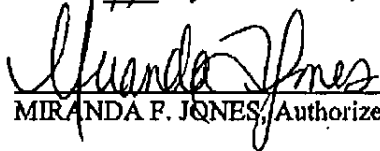
ARTICLE 7

Transfer Restrictions

The limited liability company membership interests of the Company shall be subject to the transfer restrictions set forth in the Company's Operating Agreement, a copy of which shall be maintained at the principal office of the Company.

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IN WITNESS WHEREOF, the undersigned authorized representative of the member has
executed these Articles of Organization on the 17th day of November, 2015.



MIRANDA F. JONES, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE OF
FERNANDZ FAMILY POT, LLC**

Pursuant to the provisions of Section 605.0113 of the Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is Fernandez Family Pot, LLC.
2. The name and address of the registered agent and office is:

Leslie J. Barnett
601 Bayshore Boulevard
Suite 700
Tampa, Florida 33606

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, Florida Statutes.

Dated: November 17th, 2015,



LESLIE J. BARNETT

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