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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

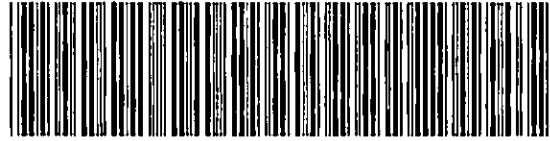
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TALLAHASSEE, FLORIDA



PRIM•MENDHEIM

ATTORNEYS AT LAW

H. SAMUEL PRIM, III
LICENSED IN ALABAMA, FLORIDA,
GEORGIA & MISSISSIPPI

R. CLIFF MENDHEIM
LICENSED IN ALABAMA
& TENNESSEE

November 1, 2017

Florida Department of State
New Filing Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Sweet & Fancy Melons, LLC
File No.: 17-572

Dear Sir or Madam:

This letter is in regards to the above-referenced matter. Please find enclosed the cover letter and original Articles of Organization for Florida Limited Liability Company for recording, along with a copy of the same for return.

I have enclosed a check made payable to the Florida Department of State for \$160.00 to cover the filing fee, certificate of status, and certified copy for return to me in the stamped self-addressed envelope also enclosed.

Thanks for your work on this matter, and if you have any questions, please do not hesitate to contact me.

Yours Truly,

PRIM & MENDHEIM, LLC

H. Samuel Prim, III

HSP

Enclosures

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Sweet & Fancy Melons, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dennis Tharp

Name of Person

Firm/Company

2141 Holley Timber Road

Address

Cottondale, FL 32431

City/State and Zip Code

sweetandfancymelons@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dennis Tharp

850

209-2083

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☐

\$130.00 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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

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Sweet & Fancy Melons, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2141 Holley Timber Road

Cottdale, FL 32431

2141 Holley Timber Road

Cottdale, FL 32431

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 Florida registration.)

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

Dennis Tharp

Name

2141 Holley Timber Road

Florida street address (P.O. Box **NOT** acceptable)

Cottdale

FL

32431

City

State

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.

Dennis Tharp

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Dennis Tharp

2141 Holley Timber Road

Cottdale, FL 32431

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Dennis Tharp

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

Dennis Tharp

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)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA