# L18000/66250

	(Requestor's Name)					
(Address)						
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(Document Number)						
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## COVER LETTER

то:	New Filing Section Division of Corporations						
SUBJE	SEASIDE CREAMERY, LLC						
SUBJEA		imited Liabili	y Company				
The enc	closed Articles of Organization and fee(s)	ire submitted	for filing.				
Please r	return all correspondence concerning this r	natter to the fo	ollowing:				
	GREGORY P. DURHAM, SR., ES	Q.					
		Name of	Person				
	GRAYROBINSON, P.A.						
	Firm/Company						
	P.O. BOX 1870						
		Addre	rss				
	MELBOURNE, FL 32902-1870						
	greg.durham@gray-robinson.com	City/State and	I Zip Code				
	E-mail address: (to be use	ed for future a	nnual report notification)				
For furthe	er information concerning this matter, plea	se call:					
		321	727-8100				
			Daytime Telephone Number				
Enclose	ed is a check for the following amount:						
\$125.00	0 Filing Fee S130.00 Filing Fee & Certificate of Status	Certific	of Filing Fee & S160.00 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

A PARTICULAR IN A DAY								
ARTICLE I - Name: The name of the Limited Liability	y Company is:							
SEASIDE ODEAME	:DV 116							
SEASIDE CREAMERY, LLC  (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")								
(*								
ARTICLE II - Address:								
The mailing address and street ad	ldress of the principal	office of the Li	nited Liability Company is:					
Principal Office Address:			Mailing Address:					
2 Fifth Avenue			2 Fifth Avenue					
Suite B			Suite B					
Indialantic, FL 3290	03		Indialantic, FL 32903					
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:								
Gregory P. Durham, Sr., Esq., GrayRobinson, P.A.								
		Name						
1795 West Nasa Blvd.								
Florida street address (P.O. Box NOT acceptable)								
	Melbourne	FL	32901					

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..

City

State

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

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# ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager Kathryn E. Durham MGR 511 Andrews Drive Melbourne Beach, FL 32951 Richard Beaudoin AMBR 423 Hiawatha Way Melbourne Beach, FL 32951 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: \_ (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:

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.

Kathryn E. Durham

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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