L18000181521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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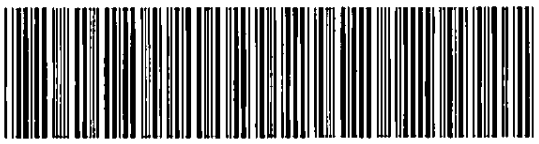

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 30 20[illegible]

T SCHROEDER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 323057 82466A

AUTHORIZATION :

COST LIMIT : $ 160.00

ORDER DATE : July 27, 2018

ORDER TIME : 2:27 PM

ORDER NO. : 323057-005

CUSTOMER NO: 82466A

DOMESTIC FILING

NAME: ALEX JAMES DONUTS, LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
_____ PLAIN STAMPED COPY
XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - EXT. 62925

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR
ALEX JAMES DONUTS, LLC

ARTICLE I - Name and Purpose: The name of the Limited Liability Company is **ALEX JAMES DONUTS, LLC** (the COMPANY), and its purpose is to conduct all activities legally permitted to it.

ARTICLE II - Address: The street and mailing addresses of the COMPANY'S principal office are:

Street Address:	Mailing Address:
11046 Spring Hill Drive Spring Hill, Florida 34608-5048	11089 Spring Hill Drive Spring Hill, Florida 34608-5000

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent is **Joseph M. Mason, Jr., Esq., 101 South Main Street, Brooksville, Florida 34601-3336.**

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept appointment as registered agent and agree to act in that capacity. I further agree to comply with all statutory provisions relating to the proper and complete performance of my duties. I am familiar with and accept the obligations of my position as registered agent pursuant to the provisions of §605.0113, *Fla. Stat., therefor.*

7/27/18

JOSEPH M. MASON, JR., as Registered Agent

ARTICLE IV- Member(s), Manager(s), and Managing Member(s): The Company is manager managed, and the name and address of each Member, Manager, and Managing Member is:

Title:	Name and Address
Members:	Cathleen R. Cavanagh, Thomas J. Masson, and Susan T. Masson 9870 Bayside Court Spring Hill, Florida 34608-3830
Managers:	Thomas J. Masson and Susan T. Masson 18697 Phillips Road Brooksville, Florida 34604-6948

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TALLAHASSEE, FLORIDA

ARTICLE V: The effective date of these Articles of Organization is the date of execution hereof.

EXECUTED on July 27, 2018, for the purposes hereinabove stated. In accordance with §605.0205(3), *Fla. Stat.*, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

JOSEPH M. MASON, Jr., as Organizing Agent, and authorized representative of a member

JMM/esh/CAV072718.AJD-ARTICLES.wpd