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FLORIDA LIMITED LIABILITY CO. BOBELLE, LLC

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ARTICLES OF ORGANIZATION

of

BOBELLE, LLC a Florida Limited Liability Company

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The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Florida Statutes Chapter 605, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be BOBELLE, LLC ("Company").

ARTICLE II - ADDRESS

The physical address of the principal office of the company shall be 1609 SE 3rd Avenue, Ocala, FL 34471.

The mailing address of the principal office of the company shall be PO Box 2077, Ocala, FL 34478-2077.

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent and registered office of the Company in the state of Florida is Gary C. Simons, Esquire, 121 NW Third Street, Ocala, FL 34475.

ARTICLE V - MANAGERS/MANAGING MEMBERS

The name and address of each Manger or Managing Member is as follows:

TITLE:	NAME:	ADDRESS:
MGR	Laura Williams Arnold	2332 SE 13th Street Ocala, FL 34471
MGR	James H. Williams, III	1330 SE 15 th Avenue Ocala, FL 34471

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MBR Laura Williams Arnold, as Trustee

MBR

of the Laura Williams Arnold Revocable

2332 SE 13th Street Ocala, FL 34471

Trust Agreement dated 12/14/2012

James H. Williams, III and Bernadina V. Williams, as Trustees of the Williams Family

1330 SE 15th Avenue Ocala, FL 34471

Declaration of Trust dated 11/28/2006

ARTICLE VI - EXISTENCE

The existence of the Company shall begin upon filing.

Signed this 27 day of February, 2020.

Laura Williams Arnold, Manager

James H. Williams, III, Manager

Laura Williams Arnold, as Trustee of the Laura Williams Arnold Revocable Trust Agreement

dated 12/14/2012, Member

James H. Williams, III, as Trustee of the Williams Pamily Declaration of Trust dated 11/28/2006

Member

Bernadina V. Williams, as Trustee of the Williams Family Declaration of Trust dated 11/28/2006

Member

MZUVUVVUUJVIJ

STATE OF FLORIDA COUNTY OF MARION

online notarizations Trustee of the Lau	n, this 🗥 day of February, 2020	before me by means of physical presence or by Laura Williams Arnold, individually and rust Agreement dated 12/14/2012, who is duced FL Dr. Lic. as
[Notary Seal]	ANN BUT CHILLIAN AND AND AND AND AND AND AND AND AND A	Notary Public Notary Public Tamela Ann Butcher Name typed, printed or stamped My Commission Expires:
online notarization	UON ng instrument was acknowledged l on, this 2 day of February, 2020 b	pefore me by means of ☐ physical presence or by James H. Williams, III, individually and as lated 11/28/2006, ☐ who is personally known as identification.
[Notary Seal]	NOTES OF SUPER TO SUPER THE SUPER TO SUPER THE	Pamela Ann Butcher Name typed, printed or stamped
		My Commission Expires: 20 FEB 27 AM 9: 56 AND

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STATE OF FLORIDA COUNTY OF MARION

☐ online notarization Williams Family Dec	instrument was acknowledged by this _ day of February, 2020 claration of Trust dated 11/28/20	by Bernadina V. William 006, □who is personally	is, as Trustee of the	
[Notary Seal]	Notery AGG338541 NOTERY CONTROL OF THE SURE OF THE SU	•	Pamela Ann Butche/ me typed, printed or stamped Commission Expires:	
	ACCEPTANCE OF REGI	STERED AGENT	20 FEB 27 AM	
,	BOBELLE, I	LLC,	۾ ج	

Undersigned hereby states that he is familiar with the obligations of Registered Agent for the Company as provided by Chapter 605, Florida Statutes, and accepts the appointment as Registered Agent for the Company.

a Florida Limited Liability Company

Signed this 27 day of February, 2020.

GARY C. SIMONS, Registered Agent

STATE OF FLORIDA

COUNTY OF MARION

online notariz	oing instrument was acknowledge ation, this day of February, 2 ally known to me or \(\Boxed{\text{U}} \) who has p	ed before me by means of Physical presence or 020 by Gary C. Simons, as Registered Agent, roduced as
[Notary Seal]	Notary 18, 205 6 P. Supering Supervision (C. STATE MINISTER)	Notary Public Permela Ann Butcher Name typed, printed or stamped My Commission Expires:

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