Division of Corporations

Florida Department of State Livston of Contourion out of the Cer Sho

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To:		
	Division of Corporations	
	Fax Mumber : (850)617-6381	
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	Account Name : C T CORPORATION SYSTEM	
	Account Number : FCA000000023	
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Enter t	he email address for this business entity to be used	for futur
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FLORIDA LIMITED LIABILITY CO. Edibles 1676, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lia	bility Company is:		** /
Edibles 1676, LL	.c		
(Must c	contain the words "Limited	Liability Company, "	L.L.C.," or "LLC.")
ARTICLE II - Address:			;÷
The mailing address and stre	et address of the principal of	office of the Limited I	Liability Company is:
Prin	gipal Office Address:		Mailing Address:
980 Hammond D	ríve	980 F	lammond Drive
980 Hammond D Suite 1000	rive	980 F Suite	
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered	18 Agent, Registered Office,	Suite Atlan & Registered Agent	1000 Ia, GA 30028 I's Signature:
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered The Limited Liability Computation of the computation of	Agent, Registered Office, any cannot serve as its own an active Florida registralic	Suite Atlan & Registered Agent Registered Agent. Yon.)	1000 ta, GA 30028
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered The Limited Liability Computation of the computation of	Agent, Registered Office, any cannot serve as its own an active Florida registralic	Suite Atlan & Registered Agent. Y on.) d agem are:	1000 Ia, GA 30028 I's Signature:
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered	Agent, Registered Office, any cannot serve as its own an active Florida registralicet address of the registered	Suite Atlan & Registered Agent. Y on.) d agem are:	1000 Ia, GA 30028 I's Signature:
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered The Limited Liability Computation of the computation of	Agent, Registered Office, any cannot serve as its own an active Florida registralicet address of the registered	Suite Atlan & Registered Agent. Y on.) d agent are: stem Name	1000 Ia, GA 30028 I's Signature:
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registralic ect address of the registered CT Corporation Systems 1200 South Pine Isla	Suite Atlan & Registered Agent. Y on.) d agent are: stem Name	ta, GA 30028 t's Signature: ou must designate an individual or
Suite 1000 Atlanta, GA 3002 ARTICLE III - Registered The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registralic ect address of the registered CT Corporation Systems 1200 South Pine Isla	Suite Atlan & Registered Agent. Y on.) d agem are: stem Name	ta, GA 30028 t's Signature: ou must designate an individual or

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, P.S.

By: MILL Michael Scraphin, Assi, Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Tariq Farid 980 Hammond Drive, Suite 1000 Atlanta, GA 30028
AMBR	Cheikh Mboup 980 Hammond Drive, Suite 1000 Atlanta, GA 30028
(Use attachment if necessary) EV: Effective date, if other than the deceive date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date clive date is listed, the date must be if filing.) The date inserted in this block does no ment's effective date on the Department.	specific and cannot be more than five business days prior to or 90 of the specific and cannot be more than five business days prior to or 90 of the specific and cannot be more than to f State's records.
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