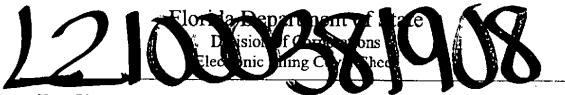
Division of Corporations



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# FLORIDA LIMITED LIABILITY CO. SEED BLOOM, LLC

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## SEED BLOOM, LLC

## (NAME OF ORGANIZATION IN FULL)

THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF ORGANIZATION, EACH A NATURAL PERSON COMPETENT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

#### ARTICLE I

THE NAME OF THE ORGANIZATION IS:

### SEED BLOOM, LLC

### ARTICLE II

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOWS: TO CONDUCT BUSINESS IN THE INDUSTRY OF FOOD AND ANY OTHER BUSINESS IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES THAT THE BOARD MAY APPROVE FROM TIME TO TIME.

#### ARTICLE III

THE INITIAL ADDRESS OF THIS ORGANIZATION IS

# 8565 WINDY CIRCLE, BOYNTON BRACH, FL 33472

PAIN BEACH COUNTY OF FLORIDA. THE MEMBERS, FROM TIME TO TIME, MAY MOVE THE PRINCIPAL OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

PREPARED BY: TURNER-MCGOWAN & ASSOCIATES LLC. 1100 S STATE ROAD 7, STE 200A MARGATE, FL 33068 (954) 970-0006

#### ARTICLE IV

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE OF PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT AGENT FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE FOLLOWING IS SUBMITTED IN COMPLIANCE WITH SAID ACT:

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF PROCESS. OTHEL TURNER: 1100 S STATE ROAD 7, STE 200A, MARGATE, FL 33068.

#### ACKNOWLEDGMENT

HAVING BEEN NAMED BY THE ABOVE LLC TO ACCEPT SERVICE OF PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID OFFICE OPEN.

BY: OTHEL TURNER

#### ARTICLE V

THE NAMES AND ADDRESSES OF THE MANAGERS OF ORGANIZATION:

DELORIS S. SIMON	PRESIDENT
8565 WINDY CIRCLE	
BOYNTON BEACH, FL 33472	
LOWRIE C. SIMON	VICE PRESIDENT
8565 WINDY CIRCLE	
BOYNTON BEACH, FL 33472	

MANAGER'S SIGNATURES

DELORIS S. SIMON

LOWKIE C. SIMON

STATE OF FLORIDA ) COUNTY OF BROWARD ) SS

AFFIRMED AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY, DULY AUTHORIZED TO TAKE OATHS AND RECEIVE ACKNOWLEDGMENTS, PERSONALLY APPEARED BEFORE ME DELORIS S. SIMON AND LOWRIE C. SIMON WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION.

WITNESS MY HAND AND SEAL THIS

DAY OF Jugues

, 2021.

(SIGNATURE OF NOTARY)

NOTARY PUBLIC, STATE OF FLORIDA

(SEAL)

NICOLE C. SEEUAL
Commission # GG 915799
Experse September 23, 2023
On no.