

L22000148838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

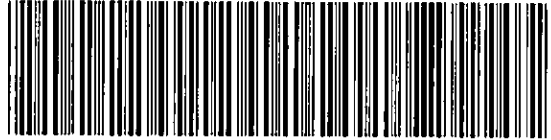
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 APR -8 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FL

2022 APR -8 PM 3:10

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 04/08/2022

Acc#I20160000072

W: C D W

Name:	1221 Snax-Sational Convertible II, LLC
Document #:	
Order #:	14259051

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 155.00

Thank you!

**ARTICLES OF ORGANIZATION
OF
1221 SNAX-SATIONAL CONVERTIBLE II, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is **1221 SNAX-SATIONAL CONVERTIBLE II, LLC**

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

**c/o 1221 Capital Partners LLC
1221 Brickell Avenue
Suite 2660
Miami, Florida 33131**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

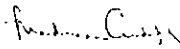
The name and the Florida street address of the registered agent are:

**NRAI Services, Inc.
1200 South Pine Island Road
Plantation, Florida 33324**

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

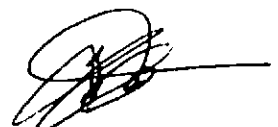
NRAI Services, Inc., as Registered Agent

By: 
Name: Madonna Cuddihy
Title: Assistant Secretary

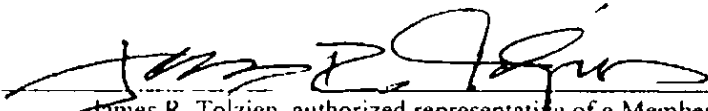
ARTICLE IV: - Management

The name and address of each person authorized to manage and control the limited liability company is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	1221 Capital Partners LLC 1221 Brickell Avenue Suite 2660 Miami, Florida 33131



IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on
April 7, 2022.


James R. Tolzien, authorized representative of a Member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155, Florida Statutes.)

James R. Tolzien
Typed or printed name of signee