

L23000388517

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6301

From:

Account Name : BERLIN PATTEN EBLING PLLC
Account Number : 105205003431
Phone : (941) 954-9991
Fax Number : (941) 954-9992

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

sjsnyder@gmail.com

**FLORIDA LIMITED LIABILITY CO.
FL.LLC, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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Submissions

SECRETARY OF STATE
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8/14/2023 7:24:52 AM PAGE 1/001 Fax Server



August 12, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BERLIN PATTEN EBLING PLLC

SUBJECT: FL.LLC, LLC
REF: W23000110263

*please see
name change*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity cannot include "LLC." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

If you have any further questions concerning your document, please call (850) 245-6052.

Rickey L Richardson
Regulatory Specialist II
New Filing Section

FAX Aud. #: H23000279378
Letter Number: 723A00018407

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~FL LLC, LLC~~ SunnyDaysFarm, LLC
(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:1529 Third Street South
Naples, FL 34102Mailing Address:1529 Third Street South
Naples, FL 34102

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Sandra J. Snyder

Name

1529 Third Street SouthFlorida street address (P.O. Box NOT acceptable)NaplesFL34102

City

State

Zip

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.

Sandra J. Snyder

Registered Agent's Signature (REQUIRED)

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TALLAHASSEE, FL

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:AMBRDavid Snyder1529 Third Street SouthNaples, FL 34102AMBRSandra J. Snyder1529 Third Street SouthNaples, FL 34102

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:Sandra J. Snyder

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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 s.817.155, F.S.Sandra J. Snyder

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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