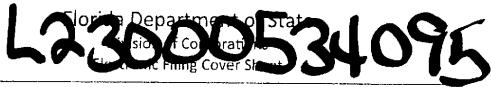
From: 16193427715



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(((H23000411248 3)))



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Division of Corporations (850)617-6381

From:

Account Name : GINN & PATROU, PA Account Number: 120190000124 Phone : (904)461-3000 Fax Number : (844)730-9828

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

FLORIDA LIMITED LIABILITY CO.

Fat Cookie LLC

Certificate of Status	0_
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

From: 16193427715

E I - Name: of the Limited Liability Company is:	
Est Caphia L.I. C	
Fat Cookie LLC	iability Company, "L.L.C.," or "LLC.")
ng address and street address of the principal offi	ice of the Limited Liability Company is:
ng address and street address of the principal offi <u>Principal Office Address</u> :	ice of the Limited Liability Company is: Mailing Address.
, ,	, , ,
ng address and street address of the principal offi	ice of the Limited Liability Company is:

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

Ginn & Patrou, PLL	<u>C</u>	
	Name	
460 A I A Beach Biv	d	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
St. Augusitne	FL	32080
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

4230004112483

From: 16193427715

. 4230004112463

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:		
MGR	Thomas McKnew 2 Luwanna Cii St Augustine, FL 32080		
			
			
-			
(Use attachment if necessary)			
-			
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be speedate of filing.) ote: If the date inserted in this block does not not the date inserted in this block does not	of filing: ecific and cannot be more than five business days prior to or 9 meet the applicable statutory filing requirements, this date will n of State's records.	•	
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