

8/2/24, 1:45 PM

Division of Corporations

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : Vcorp SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)813-3588

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

Email Address: _____

STATE OF FLORIDA
TALLAHASSEE, FL

2024 AUG -6 AM 11:58

FILED

FLORIDA LIMITED LIABILITY CO.
TAMPA BAY BOTTLING COMPANY, LLC

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

RECEIVED

2024 AUG -6 PM 1:21

TALLAHASSEE, FL
DIVISION OF CORPORATIONS
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850-617-6381

8/6/2024 11:44:39 AM PAGE 1/001 Fax Server



August 6, 2024

VCORP SERVICES, LLC

FLORIDA DEPARTMENT OF STATE
Division of CorporationsSUBJECT: TAMPA BAY BOTTLING COMPANY, LLC
REF: W24000110532FILED
2024 AUG -6 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FL

A recent audit of our records has discovered the business entity filed in this office as a limited liability company contains an unacceptable limited liability company indicator.

The purpose of this letter is to advise of this error and to let you know the document was accepted in error.

At this point, we are asking for clarification as to whether you want to be a limited liability company or were you trying to form a corporation.

If a limited liability company is the desired end result, please reply giving this office an acceptable indicator, such as Limited Liability Company, L.L.C. or LLC. We will then correct the record.

If a corporation is the desired end result, please reply advising this office of your wishes. The original filing will be marked as 'Filed in Error' and a refund will be issued to the credit card that paid for this filing. You will then need to return to our website and choose the 'New Florida Profit Corporation' filing option under our 'Filing Services' menu and start the process again.

We apologize for any inconvenience this may cause but our ultimate goal is accurate records.

If you have any questions, please feel free to contact us.

Matthew H Hitchcock
Division of Corporations
850-245-6052

Attention reviewer: this entity is a brand new LLC that is forming for the first time, can "company" not be included in the entity name?

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TAMPA BAY BOTTLING COMPANY, 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:

15340 Citrus Country Dr

Dade City, FL 33523

Mailing Address:

PO BOX 808 - 643 South Road

Milton, NY 12547

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:

Vcorp Agent Services, Inc.

Name

1200 South Pine Island Road

Florida street address (P.O. Box **NOT** acceptable)

Plantation

FL

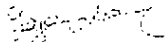
33324

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)

SECRETARY OF STATE
TAMPA, FLORIDA

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ARTICLE IV-

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

Title:**Name and Address:**

"AMBR" - Authorized Member

"MGR" - Manager

MGR/AMBREric Miller643 South Road Milton, NY 12547AMBRAlanna Davidson (a/k/a Alanna Miller) Trustee643 South Road Milton, NY 12547

(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: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.Jeffrey C. Ruderman

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)

SECRETARY OF STATE
FALL COUNTY, FL

2024 AUG -6 AM 11:58

FILED