UZ4000415256

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/01/2024	_				******	7 F7 F3 700
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ENTITY NAME St Joh	ns TC Coffee and Bak	kery LLC				
						
DOCUMENT NUMBER						
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*	*PLEASE OBTAIN THE F	FOLLOWING	FOR THE ABOV	E ENTITY**	E4:0	59
	Certified Copy of Arts	ts & Amendme	inte			
	Certificate of Good St	tanding				
	APOSTILLE' / I	NOTARIAL	CERTIFICATI	ON		
COUNTRY OF DESTINA	1710N	 				
NUMBER OF CERTIFICA	ATES REQUESTED					
TOTAL OWED \$125			ACCOUNT	#: I2016000007	72	
			5	8 F/10		
Please call Tina at	the above number for	any issue	s or concerns,	Thank you s	eo much!	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE II - Address:	contain the words "Limited Liabil	ility Company, "L.L.C.," or "LLC.")
202 1.1 1		
maning address and stre	et address of the principal office	of the Limited Liability Company is:
<u>Pri</u>	ncipal Office Address:	Mailing Address:
4663 River City	Dr. Room D05	c/o Gregorys Coffee, Inc.
Jacksonville, FL		874 6th Ave.
		New York, NY, 10001
e Limited Liability Com ther business entity with	Agent, Registered Office, & Repany cannot serve as its own Reginant active Florida registration.) The reet address of the registered agents	istered Agent. You must designate an individual or
ne Limited Liability Comp other business entity with	pany cannot serve as its own Regi- an active Florida registration.) reet address of the registered agen	istered Agent. You must designate an individual or nt are:
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he Limited Liability Com other business entity with	pany cannot serve as its own Region an active Florida registration.) reet address of the registered agenth Platinum Agent Services I Nanth 155 Office Plaza Dr.	istered Agent. You must designate an individual or nt are: LLC me

(CONTINUED)

Registered Agent's Signature (REQUIRED)

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR Gregorys Coffee, Inc. Inc. 874 6th Ave, New York, NY, 10001 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ____ (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: /s/Gregory Zamfotis 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.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Gregory Zamfotis