

Joseph J. Praske

ATTORNEY AT LAW

L 95000000060

FILED

95 JAN 16 AM 11:56

STATE OF FLORIDA

January 11, 1995

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE FL 32314

RECEIVED
JAN 16 1995
TALLAHASSEE, FLORIDA

Re: Custard Apple Palace L.C.

Dear Sir or Madam:

Enclosed are the following documents: Articles of Organization; Affidavit of Membership and Contributions; Certificate of Designation of Registered Agent/Registered Office; and one exact copy of the articles.

Also enclosed is a check for \$337.50 payable to Department of State for the filing fee, designation of registered agent, and conformed copy.

Very truly yours,

Joseph J. Praske
Joseph J. Praske

ARTICLES OF ORGANIZATION

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CLERK OF CIRCUIT COURT
CLERK OF CIRCUIT COURT

1 - Name

A limited liability company is formed pursuant to the Florida Limited Liability Company Act under the name of: Custard Apple Palace L.C.

2 - Period of Duration

The period for the duration of the limited liability company shall be perpetual.

3 - Address of Principal Office

The mailing address and street address of the principal office of the limited liability company is: Route #1, Box 72-B, Clewiston, FL 33440.

4 - Initial Registered Agent

The name and street address of the initial registered agent of the limited liability company are: Cynthia E. Holloway, Route #1, Clewiston, FL 33440.

5 - Admission of Additional Members

No person may be admitted as a member unless two-thirds of the members consent in writing to the admission of the additional member.

6 - Members Rights to Continue Business

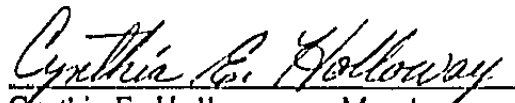
Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the business of the limited liability company may be continued by the consent of a majority of the remaining members, which shall be made in writing within 90 days of the event.

7 - Management

The limited liability company is to be managed by Cynthia E. Holloway, Route #1, Box 72-B, Clewiston, FL 33440 until the first annual meeting of members or until her successor(s) are elected and qualify.

8 - Certificates of Interest

A member's interest in the limited liability company may be evidenced by a certificate of limited liability company interest issued by the limited liability company.


Cynthia E. Holloway, a Member

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of Custard Apple Palace L.C. deposes and says:

1 -

The limited liability company has at least two members.

2 -

The total amount of cash contributed by the members is \$10,000.

3 -

The agreed value of property other than cash contributed by members is \$22,500 and includes: the recipes, trade secrets, processes and know-how of Cynthia E. Holloway with regard to custard apple fruit and derivative products.

4 -

The total amount of cash or property anticipated to be contributed by members is \$32,500. This total includes amounts from 2 and 3 above.

Cynthia E. Holloway
Cynthia E. Holloway, a Member

Date: 12/9/94

(In accordance with Sec. 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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CLERK OF COURT
JACKSONVILLE

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Sec. 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1 - Name

The name of the limited liability company is: Custard Apple Palace L.C.

2 - Name and Address of Registered Agent and Office

Cynthia E. Holloway
Route #1
Clewiston, FL 33440.

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 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.

Cynthia E. Holloway
Cynthia E. Holloway

Date: 12/9/94

FILE NOW: Fee after May 1, will be \$263.75

-this approved in full

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

06 MAY - 6 PM 9:29

STATE
FLORIDA

FILING FEE
\$238.75

Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT #L95000000060

CUSTARD APPLE PALACE L.C.
ROUTE #1, BOX 72-B
CLEWISTON FL 33440

1a. Principal Place of Business Address
ROUTE #1, BOX 72-B
CLEWISTON FL 33440

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

01/18/1995

3a. State of Formation

FL

4. FEI Number

65-055-3950

☐ Applied For

☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

☐ Additional Fee Required

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

HOLLOWAY, CYNTHIA E
ROUTE #1, BOX 72-B
CLEWISTON FL 33440

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

Cynthia E. Holloway

DATE

5/2/96

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR

HOLLOWAY, CYNTHIA E

ROUTE #1, BOX 72-B

CLEWISTON FL 33440

100001816631

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****229.70 ****229.70

100001816631

-05/10/96--01050--008

*****34.05 *****34.05

5/2/96

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

Cynthia E. Holloway

5/2/96

941-983-0350