

# L99000000518

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IN NY & NJ  
\*\* ALSO ADMITTED  
IN WASH. D.C.

REPLY TO: AVENTURA

January 26, 1999

400002756304--4  
-01/27/99-01052-005  
\*\*\*\*\*285.00 \*\*\*\*\*285.00

State of Florida  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

VIA FEDERAL EXPRESS

**RE: Articles of Organization of Coconut Chips, LLC**

Dear Sir/Madam:

Enclosed please find an original **Articles of Organization of Coconut Chips, LLC** to be filed with the Florida Division of Corporations. Also enclosed is this firm's check in the amount of \$285.00 for this service.

Thank you for your cooperation in this matter.

Very truly yours,

BEHAR, GUTT & GLAZER, P.A.

IG:daw

Enclosures

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Name	By: <i>Ira Gutt</i>
Availability	IRA GUTT
Document Examiner	<i>[Signature]</i>
Updater	<i>[Signature]</i>
Checker	<i>[Signature]</i>
Verifier	<i>[Signature]</i>
Acknowledgment	
W. P. Verifier	

93 JAN 27 AM 11:03  
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION**

**OF**

**COCONUT CHIPS, LLC**

**The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a Limited Liability Company under the laws of the State of Florida.**

**ARTICLE I. NAME**

**The name of the Limited Liability Company shall be COCONUT CHIPS, LLC**

**ARTICLE II. ADDRESS**

**The mailing address and street address of the principal office of the Limited Liability Company is 2999 Northeast 191st Street, Aventura, Florida 33180**

**The street address of the initial registered office of the corporation is 2999 Northeast 191st Street, Aventura, Florida 33180 and the name of the initial registered agent of the Limited Liability Company at that address is Ira Gutt, Esq.**

**ARTICLE III. TERM OF EXISTENCE**

**This Limited Liability Company is to exist perpetually.**

**ARTICLE IV. MANAGEMENT**

**The Limited Liability Company is to be managed by a manager and the name and address of such manager is:**

**FEARS FAMILY TRUST A  
2999 Northeast 191st Street  
Aventura, Florida 33180**

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507,  
FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY  
SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is COCONUT CHIPS, LLC
2. The name and address of the registered agent and office is:

Ira Gutt, Esq.  
2999 Northeast 191st Street  
Aventura, Florida 33180

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.

  
\_\_\_\_\_  
IRA GUTT, ESQ.


January 25, 1999

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS  
OF  
COCONUT CHIPS, LLC

The undersigned member or authorized representative of a member of COCONUT CHIPS, LLC deposes and says:

- 1) The above-named Limited Liability Company has at least two members.
- 2) The total amount of cash contributed by the member(s) is \$ 100
- 3) If any, the agreed value of property other than cash contributed by member(s) is \$0  
A description of the property is attached and made a part hereto.
- 4) The total amount of cash or property anticipated to be contributed by member(s) is  
\$ 1000
- 5) The total amount of 2, 3 and 4 is \$ 1,100

Dated: January 18, 1999

  
FEARS FAMILY TRUST A, Anthony Tumminello, Trustee

Signature of a member or authorized representative of a member.  
(In accordance with Section 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.)