

L99000002534

SANDRA L. ASHER

Requestor's Name

17 TIMBERWOOD

Address

850

CRAWFORDVILLE FL 3210523

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. GRANDMA SANDY'S L.L.C.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 MAY 4 PM 2:43

APPROVED  
AND  
FILED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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\*\*\*\*285.00 \*\*\*\*285.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

99 MAY 4 PM 2:40

RECEIVED

752000002534

Examiner's Initials

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

*Grandma Sandy's, L.L.C.*

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

*17 Timberwood Court  
Crawfordville, FL 32327*

## ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

*Continuous until dissolution by members.*

## ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

*Sandra L. Asher  
17 Timberwood Cr.T.  
Crawfordville, FL 32327*

*Jody M. Gray  
17 Timberwood Cr.T.  
Crawfordville, FL 32327*

## ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

*Unanimous vote by members.*

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**ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on 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 shall be:

To continue upon unanimous <sup>vote</sup> by membership.

**Article VII - Distribution of income and loss:**

A guaranteed payment of \$100 per week to each member.

Net income and net loss will be shared equally between members.

**ARTICLE VIII Affidavit of Membership and Contributions**

The undersigned member or authorized representative of a member of \_\_\_\_\_

Grandma Sandy's, L.L.C.

certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 1000.00;
- 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.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 1000.00.

Sandra L. Asher  
Signature of a member or an 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.)

Sandra L. Asher

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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FILED

**Filing Fee: \$250.00 for Articles and Affidavit**

# 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: \_\_\_\_\_

Grandma Sandy's, L.L.C.

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

Sandra L. Asher  
NAME

17 Timberwood Ct.  
Florida street address (P. O. Box NOT ACCEPTABLE)

Crawfordsville, FL 32327  
CITY, STATE AND ZIP

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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.*

Sandra L. Asher  
SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**