

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF ORGANIZATION

I, **Brian P. Kemp**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

**Amaryllis Kitchen LLC**  
a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on **03/01/2018** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on **04/17/2018**.



Brian P. Kemp  
Secretary of State

## ARTICLES OF ORGANIZATION

\*Electronically Filed\*

Secretary of State

Filing Date: 2/28/2018 7:18:06 PM

### BUSINESS INFORMATION

|                       |                                    |
|-----------------------|------------------------------------|
| <b>CONTROL NUMBER</b> | 18045977                           |
| <b>BUSINESS NAME</b>  | Amaryllis Kitchen LLC              |
| <b>BUSINESS TYPE</b>  | Domestic Limited Liability Company |
| <b>EFFECTIVE DATE</b> | 03/01/2018                         |

### PRINCIPAL OFFICE ADDRESS

|                |                                                   |
|----------------|---------------------------------------------------|
| <b>ADDRESS</b> | 64 E. May Street, Suite G, Winder, GA, 30680, USA |
|----------------|---------------------------------------------------|

### REGISTERED AGENT'S NAME AND ADDRESS

|                    |                                                               |
|--------------------|---------------------------------------------------------------|
| <b>NAME</b>        | <b>ADDRESS</b>                                                |
| FOULICHA DONALDSON | 980 crystal water dr, Gwinnett, LAWRENCEVILLE, GA, 30045, USA |

### ORGANIZER(S)

|                       |              |                                                        |
|-----------------------|--------------|--------------------------------------------------------|
| <b>NAME</b>           | <b>TITLE</b> | <b>ADDRESS</b>                                         |
| Foulicha Duncan, Mrs. | ORGANIZER    | 980 Crystal Water Drive, Lawrenceville, GA, 30045, USA |

### OPTIONAL PROVISIONS

N/A

### AUTHORIZER INFORMATION

|                             |              |
|-----------------------------|--------------|
| <b>AUTHORIZER SIGNATURE</b> | Maude Severe |
| <b>AUTHORIZER TITLE</b>     | Manager      |