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Potential persons who are to respond to the collection of information 1972 (6- contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response...1

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY				
Prefix		Serial		
DAT	E RECEI	VED		

Name of Offering ([] check if this NATURAL & ORGANIC LLC Private Control of the			as changed, a	nd indicate ch	nange.)
Filing Under (Check box(es) that apply):	[X] <u>Rule 504</u>	[] <u>Rule 505</u>	[] <u>Rule 506</u>		4(6) []ULOE
Type of Filing: [X] New Filing [] Amendment		`	S SEI	P 0 6 2007
	A. BASIC IDE	NTIFICATION	DATA	TH	OMSON IANCIAL
Enter the information requested	about the issu	er			MACIAL
Name of Issuer ([] check if this is Natural & Organic LLC	s an amendmer	nt and name ha	s changed, ar	nd indiciate ch	ange.)
Address of Executive Offices: 359 Telephone Number (Including Are			/ Jersey 0751:	3	

Address of Principal Busic Number (Including Area C (if different from Executive		tate, Zip Code) Telephone
	ess ersey limited liability company which has been al and organic food products branded under th	
Type of Business Organiz	ration	
[] corporation	[] limited partnership, already forme	ed [X] other (please specify):
[] business trust	[] limited partnership, to be formed	limited liability company
**************************************	Month/Day	Year
Actual or Estimated Date	of Incorporation or Organization: 05/07	[X] Actual [] Estimated
Jurisdiction of Incorporation	on or Organization: (Enter two-letter U.S. Post CN for Canada; FN for other fo	
GENERAL INSTRUCTIO	NS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or

have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[X] Promoter [X]	Beneficial Owner	[X] Executive Officer	[] Director [X	General and/or Managing Partner
Full Name (Last nam	ne first, if individual)	: Barry Silverr	nan		
Business or Resider	ce Address: 359 M	lcLean Blvd., Pa	aterson, New Jersey	y 07513	
Check Box(es) that Apply:		Beneficial Owner	[X] Executive Officer	[] Director [X]	General and/or Managing Partner
Full Name (Last nam	ne first, if individual)	: Gary Ricker			
Business or Residen	ce Address: 359 M	/lcLean Blvd., P	aterson, New Jerse	y 07513	
Check Box(es) that Apply:		Beneficial Owner	[X] Executive Officer	[] Director [X]	General and/or Managing Partner
Full Name (Last nam	ne first, if individual)	: James Burns			
Business or Residen	ce Address: 359 M	cLean Blvd., Pa	aterson, New Jersey	07513	
Check Box(es) that Apply:		Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam	e first, if individual)	:			
Business or Residen	ce Address:				
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing

											Partr	ner
Full N	lame (La	st name	e first, if	individu	al)							
Busin	ess or R	esidend	ce Addre	ess:								
Checl Apply	k Box(es)) that	[] Pro	moter [] Benefi Owner		[]Exe	ecutive icer	[][Director	[] Gene Mana Partn	aging
Full N	lame (La	st name	e first, if	individu	al):					***********		
Busin	ess or R	esidend	e Addre	ess:								
	(Use	blank	sheet, d	ог сору	and use	additio	nal cop	ies of th	is sheet,	as nec	essary.)	
		·····		B. IN	IFORMA	TION A	BOUT C	FFERIN	G			
	s the issu	uer sold									s	Yes []
2 \//h	at is the	minimu					lumn 2, i	_				\$50,0
	es the off					·		•				Yes i
with s a brok broke	rectly, ar ales of se er or deale r or deale aler, you	ecuritie aler reg er. If mo	s in the istered v ore than	offering. with the five (5)	If a pers SEC and persons	on to be i/or with to be lis	e listed is a state o ted are a	an asso or states, ssociate	ciated pe list the n d person	erson or name of	agent of the	er
Fuil N	ame (Las	st name	e first, if	individua	al)							
Busin	ess or Re	esidenc	e Addre	ss (Num	ber and	Street,	City, Stat	e, Zip Co	ode)			
Name	of Assoc	ciated E	Broker o	Dealer								
States	in Whic	h Perso	on Listed	Has Sc	licited or	Intende	to Solic	it Purcha	sers			
(Che	ck "All	States	or ch	eck inc	lividual	States				[] All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] ———	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (Las	st name	e first, if i	ndividua	al)							
Busine	ess or Re	esidenc	e Addre	ss (Num	ber and	Street, (City, Stat	e, Zip Co	ode)			
Name	of Assoc	ciated E	Broker or	Dealer								

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Chec	ck "All	States	" or ch	eck inc	lividual	States])			[] All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ame (La	st name	first, if i	ndividua	ıl)							
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, C	City, State	e, Zip Co	ode)			
Name of Associated Broker or Dealer												
	0171330	ciated b										
					licited or	Intends	to Solici	t Purcha	sers			
States	in Whic	h Perso	n Listed	Has So			to Solici		sers	[] All S	tates
States	in Whic	h Perso	n Listed	Has So					sers [FL]	[[GA]] All S [HI]	tates
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States (Chec	in Whick "All	h Perso States	n Listed " or ch [AR]	Has So eck ind [CA]	lividual [CO]	States)	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$0	\$0
Equity	\$0	\$0
[] Common [] Preferred		
Convertible Securities (including warrants)	\$0	\$0
Partnership Interests	\$0	\$0
Other (Units of Class B (non-voting) Membership Interests).	\$500,000	\$0
Total	\$500,000	\$0
Answer also in Angendiy, Column 3, if filing under LILOE		

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

		Aggregate Dollar Amount of Purchases
Accredited Investors	0	\$0
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	0	\$0

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Amount Sold
Rule 505	N/A	\$0
Regulation A	N/A	\$0
Rule 504	N/A	\$0
Total	N/A	\$0

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[]\$
Legal Fees	[X] \$10,000
Accounting Fees	[]\$
Engineering Fees	[]\$
Sales Commissions (specify finders' fees separately)	[]\$
Other Expenses (identify)	[]\$
Total	[X] \$10,000

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$490,000

Payments to

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Officers, Payments Directors, & To Affiliates Others
Salaries and fees	[X] \$220,500 [X] \$73,500
Purchase of real estate	[]\$[]
Purchase, rental or leasing and installation of machinery and equipment	[]\$\$
Construction or leasing of plant buildings and facilities	[]\$[]
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$
Repayment of indebtedness	[]\$[]
Working capital Other : License Acquisition	[]\$[X]\$147,000 []\$[X]\$49,000
	[] \$
Column Totals	[]\$[]\$
Total Payments Listed (column totals added)	[X] \$490,000

D. FEDER	RAL SIGNATURE	
The issuer has duly caused this notice to be sign notice is filed under Rule 505, the following signato the U.S. Securities and Exchange Commission furnished by the issuer to any non-accredited inv	iture constitutes an undertaking n, upon written request of its sta	by the issuer to furnish ff, the information
Issuer (Print or Type)	Signature	Date
Natural & Organic LLC	/ Maj 1/14-	7/30/07
Name of Signer (Print or Type)	Title of Signer (Print or T	ype)
Barry Silverman	Manager	
	TTAITIAN	
Intentional misstatements or omissions of	TENTION fact constitute federal crimin S.C. 1001.)	al violations. (See 18
E. STAT	TE SIGNATURE	
Is any party described in 17 CFR 230.262 presprovisions of such rule?	sently subject to any of the disqu	valification Yes No
See Appendix, Col	umn 5, for state response.	
2. The undersigned issuer hereby undertakes to this notice is filed, a notice on Form D (17 CFR 2		
3. The undersigned issuer hereby undertakes to a information furnished by the issuer to offerees.	furnish to the state administrator	rs, upon written request,
4. The undersigned issuer represents that the iss to be entitled to the Uniform limited Offering Exen and understands that the issuer claiming the avai that these conditions have been satisfied.	nption (ULOE) of the state in wh	ich this notice is filed
The issuer has read this notification and knows the be signed on its behalf by the undersigned duly a		uly caused this notice to
Issuer (Print or Type)	Signature	Date
Name of Signer (Print or Type)	Title (Print or 1	L Type)
	,	. ,

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3 Type of security	4				5 Disqualification under State ULOE		
	Intend to sell to non-accredited investors in State		and aggregate offering price offered in state	ar	(if yes, attach explanation of waiver granted)					
	(Part B-Item 1)		(Part C-Item 1)	(Part C-Item 2)				(Part E-Item 1)		
				Number of Accredited		Number of Non-Accredited				
State	Yes	No		Investors	Amount	1	Amount	Yes	No	
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AK			!							
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http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002

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