

L10000057693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300181318773

05/27/10--01049--008 **160.00

FILED
2010 MAY 27 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
MAY 28 2010
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MIKE'S LIQUORS LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MEHUL MORAR
Name of Person

Firm/Company

1604 GRAY BARK DR
Address

OLDSMAR FL 34677
City/State and Zip Code

MIKES LIQUORS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

2010 MAY 27 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

MEHUL MORAR at (813) 857-3066
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MIKE'S LIQUORS LLC
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1604 GRAY BANK DR
OLDSMAR FL 34677

SAME

2010 MAY 27 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

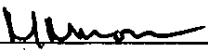
The name and the Florida street address of the registered agent are:

MEHUL MORAR
Name

1604 GRAY BANK DR
Florida street address (P.O. Box NOT acceptable)

OLDSMAR FL 34677
City, State, and Zip

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 as provided for in Chapter 608, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MBR

MEHUL MORAR
1604 GRAY PARK DR
OLDSMAR FL 34677

MGRM

KIRAN PATEL
12103 BISHOPSFORD DR
TAMPA FL 33626

2010 MAY 27 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 5-25-10 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Mehul Morar

Signature of a member or an authorized representative of a member.

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

MEHUL MORAR

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)