114000189076

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	WAIT -	MAIL
(Bu:	siness Entity Nam	ne)
		<u></u>
, (Doi	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
·		

- Office Use Only



600267063376

12/05/14--01029--006 **130.00

14 DEC -5 AM 9: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 11 2014

COVER LETTÉR

TO:	Registration Division of C			
SUBJI	ECT: <u>Orange</u>	Line III, LLC Name of Lin	nited Liability Company	
The en	closed Articles	of Organization and fee(s) ar	re submitted for filing.	
Please	return all corres	spondence concerning this m	atter to the following:	
	Carrie St	ec	Name of Person	
	Orange L	ine III, LLC d/b/a Beef Jer	ky Outlet (c/o Carrie Stec) Firm/Company	
	<u>2757 Via</u>	Cipriani, 1130B	Address	
	Clearwat	er, FL 33764	City/State and Zip Code	
Ca	arriestec@yah	oo.com E-mail address: (to be use	d for future annual report notifica	uion)
For fur	ther information	n concerning this matter, plea	ase call:	
<u>Carrie</u>		at (;	312) 560,0060 Area Code Daytime Tel	lephone Number
Enclos	ed is a check fo	r the following amount:		
\$125.0	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)
	Reg Divi P.O.	ling Address istration Section sion of Corporations Box 6327 ahassee, FL 32314	Street/Courier Add Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	Liability Company is:		
Orange Line III, LLC	st end with the words "Lim	nited Liability Company, "L.L.C.," or	"LLC.")
ARTICLE II - Address: The mailing address and		nal office of the Limited Liability Con	npany is:
Principal Office Addres	<u>ss:</u>	Mailing Address:	
Orange Line III, LLC c 2757 Via Cipriani, 113 Clearwater, FL 33764	0B	Orange Line III, LLC c/o Ca 2757 Via Cipriani, 1130B Clearwater, FL 33764	
(The Limited Liability Co		ice, & Registered Agent's Signature own Registered Agent. You must desiration.)	
The name and the Florida	a street address of the regist	ered agent are:	
2	Craig Eihl	ame	
	2757 Via Cipriani, 1130B Florida street address (P.O.		
<u>(</u>	Clearwater	FL 33764	
	City	Zip	
the place designated capacity. I further agre	in this certificate, I hereby a se to comply with the provisi I familiar with and accept th	ot service of process for the above state accept the appointment as registered agions of all statutes relating to the proper e obligations of my position as register Chapter 605, F.S	gent and agree to act in this er and complete performance
		INUED)	AH 9: 12 OF STAIL
	Page	1 of 2	<u> </u>

Title:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
AMBR	Carrie Stec
· · · · · · · · · · · · · · · · · · ·	2757 Via Cipriani, 1130B
	Clearwater, FL 33764
AMBR	Craig Eihl
	2757 Via Cipriani, 1130B
	Clearwater, FL 33764
V: Effective date, if other than the cetive date is listed, the date must be	date of filing: <u>12/9/2014</u> . (OPTIONAL) e specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the cative date is listed, the date must be filing.)	
ctive date is listed, the date must be filing.) EVI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the citive date is listed, the date must be filing.) VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the outive date is listed, the date must be filing.) VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the outive date is listed, the date must be filing.) VI: Other provisions, if any. REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the of tive date is listed, the date must be filling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a	member or an authorized representative of a member.
V: Effective date, if other than the of tive date is listed, the date must be filling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein arcting.
V: Effective date, if other than the outive date is listed, the date must be filling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation upliam aware that any false in	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein arctine. n formation submitted in a document to the Department of State.
V: Effective date, if other than the outive date is listed, the date must be filling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation upliam aware that any false in	member or an authorized representative of a member of
V: Effective date, if other than the of tive date is listed, the date must be filling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in constitutes a third degree for	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein arctine. n formation submitted in a document to the Department of State.
V: Effective date, if other than the outive date is listed, the date must be filling.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation upliam aware that any false in	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document inder the penalties of perjury that the facts stated herein arctine. nformation submitted in a document to the Department of Statestellony as provided for in s.817.155, F.S.)
V: Effective date, if other than the of tive date is listed, the date must be filling.) VI: Other provisions, if any. EEOUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in constitutes a third degree for	member or an authorized representative of a member of
V: Effective date, if other than the of tive date is listed, the date must be filing.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation up I am aware that any false in constitutes a third degree for	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein arcticle. Information submitted in a document to the Department of States are lelony as provided for in s.817.155, F.S.)