

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 101 Tallahassee, Florida 32301  
(850) 224-8700 • 1-800-442-8062 • Fax (850) 224-1222

L00000004599

Southernmost Restaurants

LLC

000003216190--3

-04/20/00--01037--025

\*\*\*125.00 \*\*\*125.00

Art of Inc. File

LTD Partnership File

Foreign Corp. File

☒ L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Art. of Amend. File

RA Resignation

Dissolution / Withdrawal

Annual Report / Reinstatement

Cert. Copy

☒ Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

FILED  
STATE  
SECRETARY OF  
DIVISION OF CORPORATIONS

00 APR 20 PM 4:34

RECEIVED

00 APR 20 AM 10:43

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

LS 4/20/00 9:30

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SOUTHERNMOST RESTAURANTS, L.L.C.

**ARTICLE II - Address:**

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

1319 Duval Street  
Key West, Florida 33040

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatures**

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

Edward W. Horan

Name

608 Whitehead Street

Florida street address (P.O. Box **NOT** acceptable)  
Key West, Florida FL 33040

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

**Article IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

 For DALE RANDS, MEMBER  
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.)

Edward W. Horan, as Attorney in fact for  
Typed or printed name of signee Dale Rands

**FILING FEES:**

\$ 100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (OPTIONAL)  
\$ 5.00 Certificate of Status (OPTIONAL)

FILED  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
APR 20 AM 4:34