

LD2000030699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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11-18-02

November 8, 2002

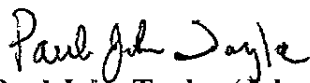
Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Florida Limited Liability Company

Attached is the Articles of Organization for Florida Limited Liability Company.

If you have any questions, I can be reached during the day from 12 noon on at 850-562-0944.

Sincerely,

  
Paul John Taylor (Johnny)  
JT's Shucker's Half-Shell Raw Bar  
3839-12 North Monroe Street  
Tallahassee, FL 32303  
850/562-0944

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

• **ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

• **ARTICLE I - Name:**

The name of the Limited Liability Company is:

JT's Shucker's Half-Shell Raw Bar, LLC

**ARTICLE II - Address:**

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

3839-12 North Monroe Street

Tallahassee, FL 32303

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

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

Paul John Taylor

Name

2110 Cynthia Drive

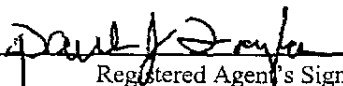
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee

FL 32303

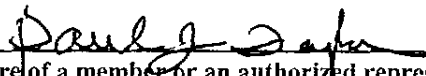
City, State, and Zip

*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

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



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.)

Paul John Taylor

Typed or printed name of signee

**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)

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AND