

L03000005841

Florida Department of State
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

GUSTO REST L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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DIVISION OF CORPORATIONS

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

ARTICLE I - Name: GUSTO REST L.L.C.

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 4903 Chiquita Boulevard, Cape Coral, Florida 33914

ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature: The name and the Florida street address of the registered agent are:

PETER LOOK
4903 Chiquita Boulevard
Cape Coral, Florida 33914

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.



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.)

PETER LOOK
Typed or printed name of signee

Prepared by:
M. DANIEL SASSO, P.A.
4223 Del Prado Boulevard
Cape Coral, Florida 33904

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