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(Re	questor's Name)			
(Ad	dress)	<u></u>		
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(City/State/Zip/Phone #)				
PICK-UP				
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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09/15/03--01015--005 **160.00

FILED 2003 SEP 15 AH 9: 36 2013 SEP 15 AH 9: 36 ALLANASSEE, FI ADIONS

J. BRYAN SEP 2.2 2003

WILLIAM E. BLYMIER 834 BRIARWOOD DRIVE WEST PALM BEACH, FLORIDA 33415

September 9, 2003

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

Gentlemen:

Enclosed is the Articles of Organization for Thai On The Fly, LLC.

A check in the amount of \$160.00 payable to the Florida Department of State is enclosed for the requisite filing fees, Designation of Registered Agent, Certified Copy and Certificate of Status.

THE SECOND SECOND

An effective date as soon as reasonably practical is hereby requested.

Questions regarding this filing should be addressed to the undersigned. My daytime telephone numbers are (561) 683-5633 or (561) 541-5956.

Very Truly Yours,

Sillian & Blymie U

William E. Blymier

Enclosures

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: ______ THAI ON THE FLY, 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:

WILLIAM E. BLYMIER

(Name of Person)

(Firm/Company)

834 BRIARWOOD DRIVE

(Address)

WEST PALM BEACH, FLORIDA 33415

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM E. BLYMIER

(Name of Person)

561

at

(Area Code & Daytime Telephone Number)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: THAI ON THE FLY, 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:

834 BRIARWOOD DRIVE WEST PALM BEACH, FLORIDA 33415 834 BRIARWOOD DRIVE WEST PALM BEACH, FLORIDA 33415

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

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

	WILLIAM E. BLYMIER	The first	
•	Name	The st	
	834 BRIARWOOD DRIVE	CECE TH	
	Florida street address (P.O. Box <u>NOT</u> acceptable)		
	WEST PALM BEACH 33415	Poor	
	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

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u>	Name and Address:	· ·
"MGR" = Manager "MGRM" = Managing Member		
MGRM	WILLIAM E. BLYMIER	
	834 BRIARWOOD DRIVE	• i
	WEST PALM BEACH, FLORIDA 33415	
MGRM	CHAMNIAN BANGKUNARAK	
	635 PALMETTO STREET	
	WEST PALM BEACH, FLORIDA 33405	▲ 公司公司 100 -
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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized pepresentative 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.)

m 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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