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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OCEANSIDE ITALIAN BAKERY & CAFE 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:

NANCY LEMIEUX
(Name of Person)

OCEANSIDE ITALIAN BAKERY & CAFE LLC
(Firm/Company)

500 VIA LUGANO CIRCLE #107
(Address)

BOYNTON BEACH, FL 33436
(City/State and Zip Code)

For further information concerning this matter, please call:

NANCY LEMIEUX at 561, 364-1156
(Name of Person) (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:

OCEANSIDE ITALIAN BAKERY + CAFE' LLC

ARTICLE II - Address:

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

Principal Office Address:

640 EAST OCEAN
AVENUE, SUITE 1+2
BOYNTON BEACH, FL 33435

Mailing Address:

SAME

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

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

NANCY LEMIEUX
Name
500 VIA LUBANO CIRCLE #107
Florida street address (P.O. Box **NOT** acceptable)
BOYNTON BEACH FLORIDA 33436
City, State, and Zip

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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, Florida Statutes..

Nancy Lemieux
Registered Agent's Signature

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGR= MANAGER
NANCY LEMIEUX

Name and Address:

500 VIA LUGANO CIRCLE
#107, BOYNTON BEACH,
FL 33436

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Nancy Lemieux
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.)

NANCY LEMIEUX
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)