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TRANSMITTAL LETTER

	gistration Section rision of Corporations					
21,	Man of Corporations					
SUBJECT: Madison Avenue Hot Dog Co. LLC						
(Name of Limited Liability Company)						
The enclosed	d Articles of Organization and fee(s) are submitted for filing.					
	Please return all correspondence concerning this matter to the following:					
	Thomas A. Madison					
	(Name of Person)					
	Madison Avenue Hot Dog Co., LLC					
	(Firm/Company)					
1310	Bellezire Circle					
	(Address)					
	Orlando, FL 32804					
(City/State and Zip Code)						
For further in	nformation concerning this matter, please call:					
নাতmas A.						
	(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 OF THE SUBSTITUTE OF STATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1310 Bellaire Circle,	1310 Bellaire Circle
Orlando, FL 32804	Orlando, FL 32804
	
ARTICLE III - Registered Agent. Re	gistered Office, & Registered Agent's Signature:
The name and the Florida street address	
The name and the Florida street address	
The name and the Florida street address Thomas a. Madison	
	of the registered agent are:
Thomas a. Madison 1310 Beliaire Circle	of the registered agent are:
Thomas a. Madison 1310 Beliaire Circle	Name Section
Thomas a. Madison 1310 Bellaire Circle Florida street add Orlando, FL 32804	Name Of the registered agent are: Name dress (P.O. Box NOT acceptable) FLORIDA OF THE PROPERTY OF THE PRO
Thomas a. Madison 1310 Bellaire Circle Florida street add Orlando, FL 32804	Name dress (P.O. Box NOT acceptable)
Thomas a. Madison 1310 Bellaire Circle Florida street add Orlando, FL 32804 Cit	Name Name dress (P.O. Box NOT acceptable) FLORIDA y, State, and Zip
Thomas a. Madison 1310 Bellaire Circle Florida street add Orlando, FL 32804 Cit	Name dress (P.O. Box NOT acceptable) FLORIDA Of the registered agent are: OF A STATE OF THE PROPERTY OF TH
Thomas a. Madison 1310 Beliaire Circle Florida street add Orlando, FL 32804 Cit Having been named as registered agent and to accompany at the place designated in this certificate gree to act in this capacity. I further agree to con	Name Oress (P.O. Box NOT acceptable) FLORIDA Ty, State, and Zip Ty, State, and Zip Ty, State, and Zip Ty, State above stated limited liability Ty, I hereby accept the appointment as registered agent and apply with the provisions of all statutes relating to the proper
Thomas a. Madison 1310 Beliaire Circle Florida street add Orlando, FL 32804 Cit laving been named as registered agent and to accompany at the place designated in this certificate agent to act in this capacity. I further agree to contain a complete performance of my duties, and I am	Name Address (P.O. Box NOT acceptable) FLORIDA The service of process for the above stated limited liability are, I hereby accept the appointment as registered agent and apply with the provisions of all statutes relating to the proper a familiar with and accept the obligations of my position as
Thomas a. Madison 1310 Bellaire Circle Florida street add Orlando, FL 32804 Cit Having been named as registered agent and to accompany at the place designated in this certificate gree to act in this capacity. I further agree to contant complete performance of my duties, and I am	Name Oress (P.O. Box NOT acceptable) FLORIDA Ty, State, and Zip Ty, State, and Zip Ty, State, and Zip Ty, State above stated limited liability Ty, I hereby accept the appointment as registered agent and apply with the provisions of all statutes relating to the proper
Thomas a. Madison 1310 Bellaire Circle Florida street add Orlando, FL 32804 Cit Having been named as registered agent and to accompany at the place designated in this certificate gree to act in this capacity. I further agree to contant complete performance of my duties, and I am	Name Address (P.O. Box NOT acceptable) FLORIDA The service of process for the above stated limited liability are, I hereby accept the appointment as registered agent and apply with the provisions of all statutes relating to the proper a familiar with and accept the obligations of my position as

Page 1 of 2 (CONTINUED)

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

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

"MGR" = Mana	ger			
"MGRM" = Mai				
"MGR"		Thomas A. Madison		
		101 Stonehedge Ct.		-
		Senford, FL 32771		
"MGR"		Cathy J. Madison		
		101 Stonehedge Ct.		
		Sanford, FL 32771	_	
"MGR"		Douglas R. Thomas		
		1310 Bellaire Circle	_	Ŧ
		Orlando, FL 32804		
	·	#-7/		· .
			_	
Alea attachment	if necessary)			
(Use attachment	ii necessary)			
NOTE: An add	litional article must be	added if an effective date is requested.		
REQUIRED SI	GNATURE: /	us Mustin	Net 10	UNSTANT.
Sign	nature of a member or an au	thorized representative of a member.	N 30	무구
of t		408(3), Florida Statutes, the execution firmation under the penalties of perjury e.)	0 PM 12: 40	RY OF STA
<u>Th</u>	omas A. Madison		E	를
	Typed or prin	nted name of signee		\widetilde{G}_{2}

Name and Address:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Title:

\$ 5.00 Certificate of Status (Optional)