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| Special Instructions to I | Filing Officer: | |
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TALLAHASSEE, FLORIS:

VIA FEDERAL EXPRESS

Florida Secretary of State Registration Section Division of Corporation 409 East Gaines Street Tallahassee, Fl 32399

RE: La Cuisine at Coral Gables, L.L.C. d/b/a La Cuisine Gourmet

Dear Sir or Madam:

Enclosed please find the original executed Articles of Organization along with a check number 0877 issued to the Florida Department of State in the amount of \$125.00 to cover the initial filing fee.

Thank you in advance for your attention to this matter. Should you have any questions, comments or concerns please contact me directly at (408) 944-4470 or elizabeth.gaubeka@quantum.com

Very truly yours,

Elizabeth Gaubeka

Sr. Corporate Paralegal

Enclosure

cc: Corporate Minute Book

TRANSMITTAL LETTER

| Division of Corporations | | | |
|--|------------------|-----------|-------|
| SUBJECT: La Cuisine at Coral Gables, L.L.C. d/b/a La Cuisine Gourmet | Ž(S | | |
| (Name of Limited Liability Company) | <u> </u> | 1 | |
| The enclosed Articles of Organization and fee(s) are submitted for filing. | AHASSEE, FLORIDA | 04 FEB 10 | 1 - C |
| Please return all correspondence concerning this matter to the following: | in c | 3 | |
| Josu Gaubeka | 10 K | 2: - | - |
| (Name of Person) | 70 | | |
| | 4 - | | |
| Distribuidora La Cuisine, Inc. | | | , |
| (Firm/Company) | | | |
| 10 Venetian Way, #1401 | | | |
| (Address) | | | • |
| | | | |
| Miami Beach, Florida 33139 | | | |
| (City/State and Zip Code) | | | |
| | | | |
| For further information concerning this matter, please call: | | | |
| Elizabeth Gaubeka at (408) 944-4470 | | | |
| (Name of Person) (Area Code & Daytime Telephone Number | er) | | |

STREET ADDRESS:

TO:

Registration Section

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

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|---------------------|------------|-------------------------------|
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| | | | | | | |

The name of the Limited Liability Company is:

La Cuisine at Coral Gables, L.L.C.

ARTICLE II - Address:

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

| Principal Office Address: | Mailing Address: |
|---------------------------|----------------------|
| 1408 N.W. 82 Avenue | 1408 N.W. 82 Avenue |
| Miami, Florida 33126 | Miami, Florida 33126 |
| | |

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

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

Josu Gaubeka

Name

10 Venetian Way, #1401

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

Miami Beach, 33139 FLORIDA

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 60& Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

| | lanager(s) or Mana lress of each Manage | ging Member(s): er or Managing Member is as follows: | SELNE |
|---|---|--|-------------------|
| Title: | | Name and Address: | AS |
| "MGR" = Manage | er | | <u> </u> |
| "MGRM" = Mana | | | inc. |
| | 0 0 | | <u> </u> |
| MGR | | Josu Gaubeka | <u>`o`</u> |
| | | 1408 N.W. 82 Avenue | _ <u>&</u> :_ |
| | | Miami, Florida 33126 | ⊅ |
| | | | |
| MGR | | Kimberly Benson | |
| | | 1408 N.W. 82 Avenue | |
| t | _ | Miami, Florida 33126 | |
| | | - | |
| MGR | Le ndro | Robert Cange | |
| 1 2 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | | 1408 N.W. 82 Avenue | _ |
| | | Miami, Florida 33126 | |
| MGR | | Andrew Hermann | |
| | | 1408 N.W. 82 Avenue | |
| | | Miami, Florida 33126 | |
| (Use attachment i | f necessary) | | |
| NOTE: An addi | tional article must l | be added if an effective date is reques | ited. |
| REQUIRED SIG | SNATURE: | | |
| · < | | | • |
| Signa | ture of a member or an | authorized representative of a member. | - |
| of thi | ecordance with section 60 s document constitutes as the facts stated herein are | 08.408(3), Florida Statutes, the execution n affirmation under the penalties of perjury true.) | |
| | Jos | u Gaubeka | |
| • • • • | | 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)