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PICK-UP WAIT MAIL	
(Business Entity Name)	
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Certified Copies Certificates of Status	_
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RUSH, MARSHALL, JONES AND KELLY, P.A.

FLETCHER G. RUSH (1917-2003)
CHARLES V. MARSHALL (1929-1994)
- DAVID B. JONES
ROGER A. KELLY
JAMES C. HINCKLEY
CHARLES R. GEORGE, III
ROBERT S. HOOFMAN
E. GIVENS GOODSPEED
DAVID G. SHIELDS
ROBERT J. WATSON, JR.

Magnolia Place 109 East Church Street, 5th Floor Post Office Box 3146 Orlando, Florida 32802-3146

> 407-425-5500 FACSIMILE 407-423-0554

> > Mark & PA 1.52

April 6, 2004

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

Re: My Private Chef, LLC

Dear Sirs:

I enclose Articles of Organization for this LLC and a money order for \$155.00.

Please file and send me a certified copy.

Very truly yours,

James C. Hinckley

JCH/wpf Encl.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	TI	CI	Æ.	I	-N	ame

The name of the Limited Liability Company is:

My Private Chef, LLC

ARTICLE II - Address:

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

Principal Office Ad	dress:		Mailing Address:
4130 Floralwood Cou	rt		4130 Floralwood Court
Orlando, FL 32812			Orlando, FL 32812
	gistered Agent, Regis orida street address of Matt Hinckley		& Registered Agent's Signature:
_	1	Name	674
	4130 Floralwood Co	ourt	860.
-	Florida street addre	ss (P.O. Box NC	OT acceptable)
	Orlando,	FL 32	2812
-	City, S	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..

(CONTINUED)

Registered Agent's Signature

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

Ł

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

"MGRM" = Managing Member		Mark St. Florida
MGRM	Matt Hinckley	
	4130 Floralwood Court	
	Orlando, FL 32812	17 % % C
		The second
	Matt Hinckley	
		19/6
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(Use attachment if necessary)		
NOTE: An additional article mu	st be added if an effective date is requested.	
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE.	// -	
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11/2/11		
Şignature of a me	mber or an authorized representative of a member.	
(In accordance with	th section 608.408(3), Florida Statutes, the execution	
of this document of	constitutes an affirmation under the penalties of perjury d herein are true.)	
Matt Hinckley	and the second in the second i	
	Typed or printed name of signee	
	1) ped of 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)