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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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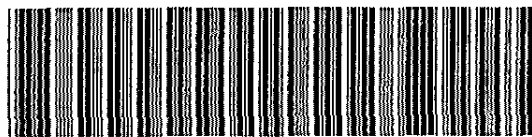
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

10/26/04

6p

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LULU AND OSCAR INCORPORATED, 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:

MICHAEL AND BARBARA PUGLIESE

(Name of Person)

LULU AND OSCAR INCORPORATED, LLC.

(Firm/Company)

6550 Gateway Ave

(Address)

Sarasota, FL. 34231

(City/State and Zip Code)

W04-32091

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael A. Pugliese

(Name of Person)

at ( 941 ) 924-3576

(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 24, 2004

MICHAEL AND BARBARA PUGLIESE  
LULU AND OSCAR INCORPORATED, LLC  
6550 GATEWAY AVE  
SARASOTA, FL 34231

SUBJECT: LULU AND OSCAR INCORPORATED, LLC  
Ref. Number: W04000032091

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TALLAHASSEE, FLORIDA

We have received your document for LULU AND OSCAR INCORPORATED, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of an LLC cannot include the word "Incorporated," because an LLC is not a corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 404A00051763

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CAFE LULU & OSCAR, 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:

MICHAEL AND BARBARA PUGLIESE

(Name of Person)

CAFE LULU & OSCAR, LLC

(Firm/Company)

6550 Gateway Ave

(Address)

Sarasota, FL. 34231

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Pugliese at (941) 924-3576  
(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CAFE LULU & OSCAR, LLC

### ARTICLE II - Address:

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

#### Principal Office Address:

6550 Gateway Ave

Sarasota, FL 34231

#### Mailing Address:

6550 Gateway Ave

Sarasota, FL 34231

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

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

MICHAEL PUGLIESE

Name

3544 Brookline Dr

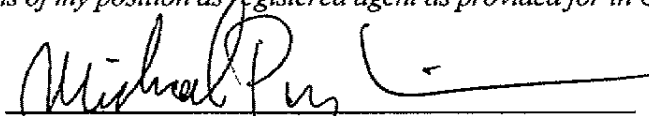
Florida street address (P.O. Box **NOT** acceptable)

Sarasota, FL 34239

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, F.S..*



Registered Agent's Signature

(CONTINUED)

**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

**Name and Address:**

"MGR"

MICHAEL PUGLIESE

3544 Brookline Dr.

Sarasota, FL 34239

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

SIGNATURE: Michael Paylin

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.)

MICHAEL PUGLIESE

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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