L05000027884

	(Requestor's Name)	
	(Address)	
	(Address)	-
	(City/State/Zip/Phon	e #)
PICK-U	UP WAIT	MAIL
<u>* .,</u>	(Business Entity Nar	ne)
<u></u>	(Document Number)	
Certified Copies	Certificates	of Status
Special Instruction	ns to Filing Officer:	
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TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT:	Lakewood	l Grille LLC.	
SUBJECT.		d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
		ee Howdershelt Jr.	
	(1	Name of Person)	
	Lak	ewood Grille	
	0	Firm/Company)	
	20	001 Queenswood Dr	
/- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-	J	(Address)	
	T., 11t.	El 20002	
=1=		assee, FL 32303 State and Zip Code)	
	concerning this matter, please		
Denver Howdershelt (Name	of Person)	at (850) 509-2929 (Area Code & Daytime 1	
	or the following amount:	,	2005 7.11. 7.11.
3 \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee? Certificate of Status & Certified Copy (additional copy is enclosed)
	ET ADDRESS:	MAILING A	

Division of Corporations

P.O. Box 6327 Tallahassee, Florida 32314

Division of Corporations

409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Lakewood Grille LLC.					
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
4556 Capital Circle NW	4556 Capital Circle NW				
Tallahassee, FL 32303	Tallahassee, FL 32303				
ARTICLE III - Registered Agent, Registere The name and the Florida street address of the Denver Lee Howdershelt Jr. Name	registered agent are:				
	•				
4556 Capital Circle NW	idress (P.O. Box NOT acceptable)				
	idress (r.O. Box NOT acceptable)				
Tallahassee, FL 32303 City, State,	FL and Zip				
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and instered agent as provided for in Chapter 608, F.S.				
New Zee 19 Registered Agent	ouder To				
Registered Agent	rs 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:		
MGRM	Denver L Howdershelt		
,	2001 Queenswood Dr		
	Tallahassee, FL 32303		
MGRM	Donna G Howdershelt		
	2001 Queenswood Dr		
	Tallahassee, FL 32303		
MGRM	Shawn R Guerin		
	2001 Queenswood Dr		
	Tallahassee, FL 32303		
(Use attachment if necessary)			
NOTE: An additional article must be added if an effective date is requested.			
REQUIRED SIGNATURE:			
(In accordance with section	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury in are true.)		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)