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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

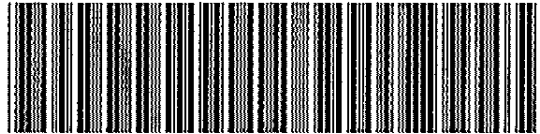
(Business Entity Name)

(Document Number)

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05 APR -8 PM 12:07
TALLAHASSEE, FLORIDA

T. Brumbley APR 11 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RESTAURANT EFFICIENCY INVENTIONS & PATENTS LICENSE
(Name of Limited Liability Company) LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STANLEY E. FOSTER
(Name of Person)

(Firm Company)

PO BOX 2344
(Address)

TITUSVILLE, FL 32781-2344
(City, State and Zip Code)

For further information concerning this matter, please call:

STANLEY E. FOSTER at (321) 267-6833
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$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)

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: RESTAURANT EFFICIENCY
INVENTIONS + PATENTS LICENSING, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1940 TRANQUILITY LN.
TITUSVILLE, FL 32796

PO BOX 2344
TITUSVILLE, FL 32781-2344

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

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

STANLEY E. FOSTER
Name

1940 TRANQUILITY LANE
Florida street address (P.O. Box **NOT** acceptable)

TITUSVILLE FL 32796
City, State, and Zip

FILED
05 APR -8 PM 12:07
TALLAHASSEE, FLORIDA

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: Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

STANLEY E. FOSTER, MGRM
Typed or printed name of signee

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)

FILED
05 APR -8 PM 12:07
STATE OF FLORIDA
TALLAHASSEE