

LOSD000044522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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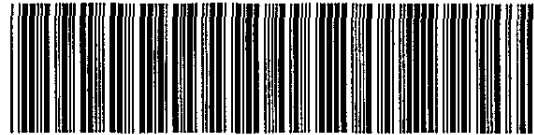
(Business Entity Name)

(Document Number)

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**TRANSMITTAL LETTER**

**FILED**

**TO: Registration Section  
Division of Corporations**

2017-2 FEB 26

**SUBJECT: SIMBO'S RESTAURANT, LLC  
(Name of Limited Liability Company)**

2017-2 FEB 26

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

**Please return all correspondence concerning this matter to the following:**

**GERALD HOLLEY  
Attorney for former of LLC  
PO Box 268  
Chipley, Florida 32428**

**For further information concerning this matter, please call:**

**GERALD HOLLEY at 850-638-4317**

**Enclosed is a check for the following amount:**

**\$155.00 filing fee and certified copy**

**STREET ADDRESS:**

**Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399**

**MAILING ADDRESS:**

**Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314**

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I-Name:**

**SIMBO'S RESTAURANT, LLC**

**ARTICLE II-Address:**

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

**Principal Office Address:**

**2005 S. Waukesha Street  
Bonifay, Florida 32425**

**Mailing Address:**

**2005 S. Waukesha Street  
Bonifay, Florida 32425**

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

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

**EARNEST M. SIMS  
Name**

**1751 Sims Boulevard  
Florida Street Address**

**Bonifay, Florida 32425  
City, State & 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.*

*Earnest M. Sims*

**Registered Agent's Signature**

**(Continued)**

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

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

**Title:**

**Name and Address:**

**"MGR"=Manager**

**"MGRM"=Managing Member**

**MGRM**

**Betty L. Sims  
102 S. Waukesha Street  
Bonifay, Florida 32425**

**MGRM**

**Earnest M. Sims  
1751 Sims Boulevard  
Bonifay, Florida 32425**

**MGRM**

**Anthony Howell  
1008 S. Waukesha Street  
Bonifay, Florida 32425**

**MGRM**

**Terry Howell  
1008 S. Waukesha Street  
Bonifay, Florida 32425**

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

**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.**

**Earnest M. Sims**

**Typed or printed name of signee**

**Filing Fee:**

**\$125.00 Filing fee for Articles of Organization and Designation Of Registered Agent**

**\$30.00 Certified Copy (Optional)**

**\$5.00 Certificate of Status (Optional)**