

L05000046160

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☐ MAIL

(Business Entity Name)

(Document Number)

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05 MAY -9 PM 1:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Triple J Cafe, 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:

Sharon LaTulippe  
(Name of Person)

Triple J Cafe, LLC  
(Firm/Company)

100 Temple Grove Drive  
(Address)

Winter Garden, FL 34787  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon LaTulippe at ( 407 ) 925-5116  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee & Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee & Certificate of Status & Certified Copy<br>(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

W05-20246

FILED  
05 MAY - 9 PM 1:51  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 21, 2005

SHARON LA TULIPPE  
TRIPLE J CAFE, LLC  
100 TEMPLE GROVE DRIVE  
WINTER GARDEN, FL 34787

SUBJECT: TRIPLE J CAFE, LLC  
Ref. Number: W05000020246

We have received your document for TRIPLE J CAFE, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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: 905A00027490

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05 MAY -9 PM 1:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Triple J Cafe, L.L.C.

## ARTICLE II - Address:

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

### Principal Office Address:

100 Temple Grove Drive

Winter Garden, FL 34787

### Mailing Address:

100 Temple Grove Drive

Winter Garden, FL 34787

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

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

Barry Deemer

Name

100 Temple Grove Drive

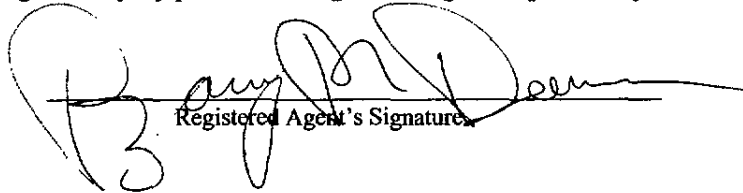
Florida street address (P.O. Box **NOT** acceptable)

Winter Garden, FL 34787

FL

City, 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..*

  
Registered Agent's Signature

(CONTINUED)

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**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

Sharon LaTulippe

100 Temple Grove Drive

Winter Garden, FL 34787

MGRM

Barry Deemer

100 Temple Grove Drive

Winter Garden, FL 34787

NA

NA

(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.)

Sharon LaTulippe

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

05 MAY -9 PM 1:52

FILED

**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)