## 105000058156

(Re	questor's Name)	
(Ad	dress)	
4.1		
(Ad	dress)	
(Cit	ty/Stat <b>e/Z</b> ip/Phone	· #)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,
		1019
	Office Use Onl	



100055564271

06/06/05--01035--023 \*\*160.00

SECTION OF STATE

JUN -6 PM I

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PANTRY Cournet LLC (Name of Limited Liability)	y Company)
The enclosed Articles of Organization and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the f	ollowing:
JEFFROY Hazim (Name of P	erson)
(Table of I	olson,
(Firm/Com	pany)
6555 Powerlive Rd	S. S. Je 103 PSE 35
Ff. Laudee da (City/State and	SECULIA CONTROLL SECULI
For further information concerning this matter, please call:	IDA S6
$\frac{\int \mathcal{E}_{1}^{2} - \mathcal{F}_{1}(2c_{1})}{\int (Name \text{ of Person})} \text{ at } (9)$	Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certif	55.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:

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

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Partey Governet LLC			
ARTICLE II - Address:			
The mailing address and street address of the princ	ipal office of the Limited Liability Comp	pany is:	
Principal Office Address:	Mailing Address:		
6555 Paverline Rd.	Same		
Ft LAUDERDALD FL 3330S			
ARTICLE III - Registered Agent, Registered O	ffice, & Registered Agent's Signature:	:	
The name and the Florida street address of the regi	istered agent are:	NUL 50	
Name	 고급 설득	ĮŲ.	-T&
	Sub- 103 s (P.O. Box NOT acceptable)	-6 PM	
Ft. Laudermie F City. State, and	1>***	1:56	

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)

The name and address of each Mana	ger or Managing Member is as follows:			
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
JEFFREY HAZIM MORM	6555 Poweolive Rd Sule H. Lauperzonie PC 33309	503		
Chan Goldman, MGR	9200 SW 71AUE MIANI FC. 33156			
(Use attachment if necessary)				
NOTE: An additional article mus	t be added if an effective date is requested.			
REQUIRED SIGNATURE:		SECHLIAN MILAHASSI	M4 9- NNF 50	<u> </u>
(In accordance with so of this document consthat the facts stated	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)  HALM MANRIE Mesher  yped or printed name of signee	Y OF STATE FF FI ORIDA	PM 1:56	FILED
Filing Foos				

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)