

L05000105907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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 2. Qualifier \_\_\_\_\_  
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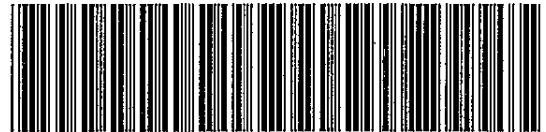
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DATE: 10/10/2004

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Subject Gallery Square The Art of Catering, LLC

Enclosed is an original and one (1) copy of the articles of organization and a check for

Ø\$155.00

Filing Fee, Registered Agent Fee & Certified Copy

From: Kirk Scudder  
3315 SE 6<sup>th</sup> Street  
Ocala, FL 34471

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Articles Of Organization  
For  
Florida Limited Liability Company  
Gallery Square The Art of Catering, LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is Gallery Square The Art of Catering, LLC.

**ARTICLE II – Address:**

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

4645 E. Silver Springs Blvd  
Ocala, FL 34470

**ARTICLE III – Duration:**

The Limited Liability Company shall dissolve no later than 12/31/2099.

**ARTICLE IV – Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Robert K. Scudder  
3315 SE 6<sup>th</sup> Street  
Ocala, FL 34471

Joseph D. Hill  
4016 SE 17<sup>th</sup> Street  
Ocala, FL 34471

**ARTICLE V – Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: NONE



**Kirk Scudder, Member**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is Gallery Square The Art of Catering, LLC.
2. The name and the Florida street address of the registered agent is:

Kirk Scudder  
3315 SE 6<sup>th</sup> Street  
Ocala, FL 34471

*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.*



Kirk Scudder, Registered Agent

Filing Fee: \$ 25 for Designation of Registered Agent

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TALLAHASSEE, FLORIDA

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