

L06000003094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

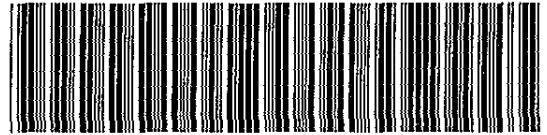
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 802107 81034A

AUTHORIZATION :

Spuddelean

COST LIMIT : \$ 155.00

ORDER DATE : January 9, 2006

ORDER TIME : 5:31 PM

ORDER NO. : 802107-005

CUSTOMER NO: 81034A

FILED
2006 JAN 10 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: THE CULINARY GALLERY, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 2933

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION

OF

THE CULINARY GALLERY, LLC

FILED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLE I ~ Name

The name of the limited liability company shall be THE CULINARY GALLERY, LLC.

ARTICLE II ~ Address

The street address of the principal office of the Limited Liability Company shall be 843 Kell-Aire Drive, Destin, Okaloosa County, Florida 32541, but it shall have the power and authority to establish branch offices at such place or places as may be designated by the members.

The mailing address for the Limited Liability Company shall be 843 Kell-Aire Drive, Destin, Okaloosa County, Florida 32541.

ARTICLE III ~ Registered Agent, Registered Office & Registered Agent's Signature

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

Michael Wm Mead, P.A.
24 Walter Martin Road, Suite 3
Fort Walton Beach, FL 32548

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

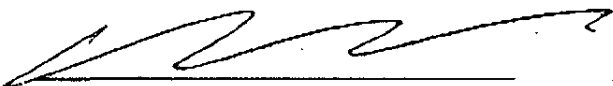
comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


Michael Wm Mead
Registered Agent's Signature

ARTICLE IV ~ Management

☒ This Limited Liability Company is a member-managed company.

This Limited Liability Company is a manager-managed company.


Michael Wm Mead, as agent for members

In accordance with §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.


Michael Wm Mead

January 9, 2006
Date signed

STATE OF FLORIDA
COUNTY OF OKALOOSA

The foregoing instrument was acknowledged before me this 9th day of January, 2006 by Michael Wm Mead, who is personally known to me.


Notary Public
My Commission Expires:

