


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

3/ **FILED**
Apr 21, 2008 8:00 am
Secretary of State

03-24-2008 90241 029 ***138.75

DOCUMENT # L06000122782					
1. Entity Name MORLIN HOSPITALITY GROUP OF CHAMBLEE, LLC					
Principal Place of Business 5414 N.W. 72ND AVENUE MIAMI, FL 33166 US			Mailing Address 5414 N.W. 72ND AVENUE MIAMI, FL 33166 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number APPLIED FOR 26-2417656	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FELLMAN, SETH 5414 NW 72ND AVENUE MIAMI, FL 33166			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>SETH FELLMAN</i> (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FELLMAN, SETH 5414 N.W. 72ND AVENUE MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>[Signature]</i>			Date: <i>9/10/08</i> Daytime Phone #: <i>305-254-8000</i>		

30004439



03052008 Chg-LLC CR2E083 (12/06)

ATTACHMENT

30004489

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L06000122782
FILED 8:00 AM
December 28, 2006
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

MORLIN HOSPITALITY GROUP OF CHAMBLEE, LLC

Article II

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

5414 N.W. 72ND AVENUE
MIAMI, FL. US 33166

The mailing address of the Limited Liability Company is:

5414 N.W. 72ND AVENUE
MIAMI, FL. US 33166

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

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

STEVEN A WEINBERG
C/O FRANK WEINBERG & BLACK, P.L.
7805 S.W. 6TH COURT
PLANTATION, FL. 33324

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.

Registered Agent Signature: STEVEN A. WEINBERG

ATTACHMENT

Article V

The name and address of managing members/managers are:

Title: MGR
SETH FELLMAN
5414 N.W. 72ND AVENUE
MIAMI, FL. 33166 US

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Signature of member or an authorized representative of a member

Signature: SETH FELLMAN, AUTHORIZED REPRESENTATIVE