

FF \$125

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tastebuds of Tampa Bay
(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:

Lisa Tamargo

(Name of Person)

(Firm/Company)

5426 N. River Shore Drive

(Address)

Tampa, FL 33603

(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Tamargo at (813) 310-4007
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$55.00

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Lisa Tamargo

From: coronline@dos.state.fl.us
Sent: Friday, June 22, 2007 8:40 AM
To: LISATAMARGO@TAMPABAY.RR.COM
Subject: Corporate Filing - 300104715943

The Articles of Incorporation for TASTEBUDS OF TAMPA BAY, INC. were filed electronically on June 22, 2007, as verified by the letter and authentication number shown below and were assigned document number P07000072619. Please refer to this number whenever corresponding with this office.

Electronic filing and certification is provided for in section 15.16, Florida Statutes, and has the same legal effect as any other filing or certificate.

A corporation annual report/uniform business report will be due this office between January 1 and May 1 of the year following the calendar year of the file/effective date. A Federal Employer Identification (FEI) number will be required before this report can be filed. Please apply NOW with the Internal Revenue Service by calling 1-800-829-3676 and requesting form SS-4 or by going to their website at www.irs.ustreas.gov.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have any questions regarding corporations, please contact this office at the address given below.

Sincerely,
Justin Shivers
Document Specialist
New Filings Section

~~~Division of Corporations - P.O. Box 6327 - Tallahassee, FL 32314~~~

Letter Number: 070622083934-300104715943

Brenda,  
I spoke with Lee Yarbrough to advise that I incorrectly filed as a "Inc", when I should have filed as an "LLC". I'm so sorry for any inconvenience I've inclosed the info Lee advised me to complete and send to you, along with the \$55 check for the cost difference.

Thanks very much,  
Lisa Tamargo

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Tastebuds of Tampa Bay, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

#### Principal Office Address:

5426 N. River Shore Drive  
Tampa, FL 33603

#### Mailing Address:

5426 N. River Shore Drive  
Tampa, FL 33603

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Lisa Tamargo

Name

5426 N. River Shore Drive

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

Tampa

FL 33603

City, State, and Zip

07 JUN 27 AM 10:12  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*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 (REQUIRED)

(CONTINUED)

Page 1 of 2

**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:**

MGRM

Lisa Tamargo

5426 N. River Shore Drive

Tampa, FL 33603

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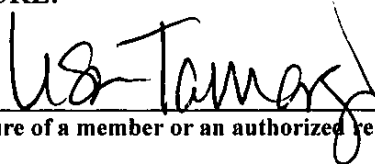
\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

Lisa Tamargo

\_\_\_\_\_  
Typed or printed name of signee

**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)**