

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

EMPIRE CORPORATE KIT COMPANY Account Name

072450003255 Account Number :

(305) 634-3694 Phone Fax Number (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

regular john, lle



Certificate of Status	. 0
Certified Copy	1
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EMPIRE CORP KIT

(3)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIÇL	E I -	Name:
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The name of the Limited Liability Company is:

Regular John, LLC

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

ARTICLE U - Address:

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

Principal Office Address:

Mailing Address:

1043 Adams Street

Hollywood, FL 33019

1043 Adams Street Hollywood, FL 33019

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;

Donald R. Tescher, Esq.

Nume

2101 Corporate Blvd. Ste, 107

Plorida street address (P.O. Box NOT acceptable)

Boca Raton; FL 33431

City, State, and Zip

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 a provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
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DIVISION OF CORPORATIONS

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Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MOKW. = Managing Memoci	
MGR	Mexican Blackbird, LLC
	1043 Adams Street
	Hollywood, FL 33019
	···· — · -
(Use attachment if necessary)	•
(Dec anacimpent it necessary)	
LEV: Effective date, if other the	an the date of filing: (OPTIONA
ffective date is listed, the date m	ust be specific and cannot be more than five business day
days after the date of filing.)	•
·	
ABATIBBB SKAN ARRIVA	1000
<u>REOUIRED</u> SIGNATURE:	
Δ	
Signature of a n	comber or an authorized representative of a metaber.
_	
(in accordance y	rith section 608.408(3), Florida Statutes, the execution
of this document	t constitutes an affirmation under the penalties of perjury

Filing Face:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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Donald R. Tescher, Esq.

Typed or printed name of signee

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Designation

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