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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

17

# COVER LETTER

TO: Registration Division of	n Section Corporations		· .
<sub>SUBJECT:</sub> Islar	nder's Catering, LLC		
		ited Liability Company)	<del></del>
The enclosed Article	es of Organization and fee(s) are	e submitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
Melanie	Roger		
		(Name of Person)	
Islander	's Catering, LLC		
		(Firm/Company)	
6213 W	illoughby Circle		
-		(Address)	200 SE
Lake Wo	orth, Fl. 33463		ZIOT DEC SECRETO ALLAHAS
	(C	ity/State and Zip Code)	C IT
For further informati	on concerning this matter, pleas	se call:	
Melanie Rog	er	at (561 ) 818-8341	H: HP
(Na	ame of Person)	(Area Code & Daytime Telepho	ne Number)
Enclosed is a checl	k for the following amount:		
\$125.00 Filing Fe	e \$\sumsymbol{\sumsymbol{\subsymbol{\sin}\symbol{\sin}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	Certified Copy C (additional copy is enclosed) C	60.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
Market Park		Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	e
क १८ हम्प्यकृतः, क्रेस्टक्ष्यक्ष	data e suranua de moder	956 - +1}-	
	••	Capaca a New Color	
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Islander's Catering, LLC (Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
	, , , , , ,
ARTICLE II - Address:	orincipal office of the Limited Liability Company is:
The maning address and street address of the p	inhelpar office of the Elimited Elability Company is.
Principal Office Address:	Mailing Address:
6213 Willoughby Circle, Lake Worth Fl. 33463	6213 Willoughby Circle, Lake Worth Fl. 33463
	75
ARTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve as its own Registeries business entity with an active Florida registration.) The name and the Florida street address of the  Etzar Roger  Name	
6213 Willoughby Ci	rcle
Florida street ac	ddress (P.O. Box NOT acceptable)
Lake Worth Fl. 334	$63_{ m FL}$
City State	and Zip
City, State,	

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

. . . .

The name and address of each Manager or Managing Member is as follows:

President	Melanie Roger	
	6213 Willoughby Circle	
	Lake Worth, FI 33463	
Vice President	Etzar Roger	
	6213 Willoughby Circle	
	Lake Worth, Fl. 33463	
General Manager	Walter Davis	
	6213 Willoughby Circle	
	Lake Worth, Fl. 33463	
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	Six Six	
Use attachment if necessary)	μ. Ω <sub>ω</sub> ο	T
EV: Effective date, if other than the	S	OPTIO

### **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.)

MELANIE ROGER

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)