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Max Langen, P.A.

115 E. Palm Midway Miami Beach, FL 33139 Max Langen@hotmail.com

(305) 343-1423

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Fax (305) 674-0022

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: HAULOVER RESTAURANT CONCEPTS, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAX LANGEN HAULOVER RESTAURANT CONCEPTS, LLC 115 E. PALM MIDWAY MIAMI BEACH, FL 33139

For further information concerning this matter, please call:

MAX LANGEN at (305) 343-1423

Enclosed is a check for the following amount:

\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Cit Tallahassee, FL 32301	rcle	

Max Langen

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2000 SEP 15 PM 1: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Article I – Name

The name of the Limited Liability Company is:
HAULOVER RESTAURANT CONCEPTS, LLC

Article II - Address

The street address of the principal office of the Limited Liability Company is: 115 E. PALM MIDWAY
MIAMI BEACH, FL 33139

The mailing address of the Limited Liability Company is: 115 E. PALM MIDWAY MIAMI BEACH, FL 33139

Article III - Purpose

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS

Article IV – Registered Agent, Registered Office, & Registered Agent's Signature

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

MAX LANGEN 115 E. PALM MIDWAY MIAMI BEACH, FL 33139

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

FILED

Article V - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows: SEP 15 PH 1: 37

Title: MGRM MAX LANGEN 115 E. PALM MIDWAY MIAMI BEACH, FL 33139

SEURETARY OF STATE TALLAHASSEE, FLORIDA

Article VI

The effective date for this Limited Liability Company shall be: 09/16/2008

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 fact stated herein are true.)

14x 010 00x

Name of signee