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**EXAMINER** 



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SECRETARY OF STATE

# **COVER LETTER**

TO:

TO: Registration Section Division of Corporations		
SUBJECT: RESTAURANT PROMOTION MANAGEMENT, LLC		
(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:		
JOHN D. BURNS (Name of Person)		
RESTAURANT PROMOTION MANAGEMENT, LLC		
(Firm/Company)		
10773 NW 58th ST. #151		
(Address)		
DORAL, FL 33178 🛴		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
JOHN D. BURNS 305 , 962-1311		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\times \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)		
Mailing Address Registration Section  Street/Courier Address Registration Section		

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

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

# RESTAURANT PROMOTION MANAGEMENT, LLC

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

### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
5501 NW 112th Ct., Doral, FI 33178	10773 NW 58th ST. #151, DORAL, FL 33178
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
GLORIA A. BURN	
5501 NW 112th C	
Florida stree  DORAL, FL 3317	et address (P.O. Box <u>NOT</u> acceptable)
	ate, 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 registered agent as provided for in Chapter 608, F.S..

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JOHN D. BURNS
	5501 NW 112th Ct., Doral, Fl 33178
MGRM	GLORIA A. BURNS
	5501 NW 112th Ct., Doral, FI 33178
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: JANUARY 20, 2009. (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.)

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)