

LB9000017716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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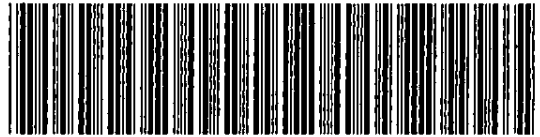
**L. SELLERS**

FEB 23 2009

**EXAMINER**

~~W. R. Sellers~~

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SOUTH FLORIDA  
TALLAHASSEE, FLORIDA

09 FEB 20 AM 8:47

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Burnin Smyrnans, 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:

Jeffrey White

(Name of Person)

The Burnin Smyrnans, LLC.

(Firm/Company)

803 14th Ave

(Address)

New Smyrna Beach, FL 32169

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey White

(Name of Person)

at ( 386 ) 847-9137

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 23, 2008

JEFFREY WHITE  
803 14TH AVENUE  
NEW SMYRNA BEACH, FL 32169

SUBJECT: THE BURNIN SMYRNANS, LLC.  
Ref. Number: W08000056557

We have received your document for THE BURNIN SMYRNANS, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on December 22, 2008. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 408A00061466

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

The Burnin Smyrnans, 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:

803 14th Ave

New Smyrna Beach, FL 32169

#### Mailing Address:

803 14th Ave

New Smyrna Beach, FL 32169

### 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:

Jeffrey White

Name

803 14th Ave

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

New Smyrna Beach, FL

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 registered agent as provided for in Chapter 608, F.S..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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:**

MGR

Jeffrey White

803 14th Ave

New Smyrna Beach, FL 32169

MGR

Jason Rogers

3446 Soho Street

Orlando, FL 32835

MGR

Eric Christian

2550 Oak Hollow Drive

Kissimmee, FL 34744

MGR

Jason Wigley

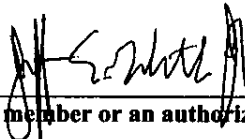
851 Schoolway Ave

New Smyrna Beach, FL 32169

(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.)

Jeffrey White

Typed or printed name of signer

**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)**

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09 FEB 20 AM 8:47  
TALLAHASSEE FLORIDA

## ATTACHMENT A

TITLE

MGR

NAME & ADDRESS

Anthony Diaz  
2462 El Marra Drive  
Ocoee, FL 32835