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SECRETARY OF STATE
TANK A MASSEF, FLORIDA

C. LEWIS
FEB 2 6 2009
EXAMINER

## · COVER LETTER

	stration Section ion of Corporations	
SUBJECT:	Sun Dog's	s Grill, L.L.C.
Sobject	(Name of Limite	ed Liability Company)
The enclosed	· Articles of Organization and fee(s) are s	submitted for filing.
Please return a	all correspondence concerning this matt	er to the following:
	Rich	ard E. St. John
· <del>·············</del>	(	(Name of Person)
<del></del>		(Firm/Company)
	1705 Wi	ld Indigo Terrace
<del>.</del>		(Address)
		do, FL. 32766
	(City	//State and Zip Code)
For further inf	ormation concerning this matter, please	call:
. R	Richard St. John	at ( 407 ) 971-1265
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a	check for the following amount:	
]\$125.00 Fili	ng Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Sertified 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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	5	
	In Dog's Grill, L.L.C. ds "Limited Liability Company, "L.L.C.," or "Ll.C.")	
(Must end with the wor	ds Elimited Elability Company, E.E.C., or Elec. )	
ARTICLE II - Address: The mailing address and street address	dress of the principal office of the Limited Liability Compar	ny is:
Principal Office Address:	Mailing Address:	
1705 Wild Indigo Terrace	1705 Wild Indigo Terrace	
Oviedo, FL. 32766	Oviedo, FL. 32766	
The name and the Florida street ac	ahida P. St. John  Name  TALLARE  TALLARE  Name  TALLARE  TALLARE  Name  TALLARE  TALLARE  Name  TALLARE  TALLA	# here } -
	Name Par Par	T
1705	Wild Indigo Terrace Florida street address (P.O. Box NOT acceptable)  Oviedo, FL 32766	
	Florida street address (P.O. Box NOT acceptable)	5 C
	Oviedo, <sub>FL</sub> 32766	<u>.</u> :
	City, State, and Zip	•
liability company at the place of registered agent and agree to act	l agent and to accept service of process for the above stated lin designated in this certificate, I hereby accept the appointment in in this capacity. I further agree to comply with the provisions ad complete performance of my duties, and I am familiar with a	as of all and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

FILED

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

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

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<u>Title:</u> "MGR" = Manager	Name and Address:	SECRETARY OF S TALLAHASSEE, FI
"MGRM" = Managing Member	er	
MGR	Richard E. St. John	
	1705 Wild Indigo Terrace	·
	Oviedo, FL 32766	
MGRM	Zahida P. St. John	
	1705 Wild Indigo Terrace	<del></del>
	Oviedo, FL 32766	
		· · · · · · · · · · · · · · · · · · ·
		<del></del>
		<del></del>
(Use attachment if necessary)		
•		
CLE V: Effective date, if other the	nan the date of filing:	(OPTIONAL)
	nust be specific and cannot be more than	
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.)

Richard E. St. John

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)