109000024777

•						
(Re	equestor's Name)					
(Ac	ldress)					
(Address)						
· · · · · · · · · · · · · · · · · · ·	ty/State/Zip/Phone	40				
(CII	ly/State/Zip/Phone	#)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nam	e)				
		•				
(Do	cument Number)					
Certified Copies	_ Certificates	of Status				
Special Instructions to	Filing Officer:					
	_					
		-				
		į				
	•					
		j				
		ŀ				
<u></u>						





800145374608

03/12/09--01007--022 **160.00

2009 MAR 12 PH 12: 39
SECRETARY OF STATE

T. CLINE
MAR 1 3 2009
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: RJ's Grill, 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:
Jose E. Arias
(Name of Person)
RJ's Grill, LLC
(Firm/Company)
600 parkview Dr. Apt. 523
(Address)
Hallandale Beach. Florida. 33009
(City/State and Zip Code)
For further information concerning this matter, please call: Jose E. Arias (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$ \$155.00 Filing Fee & \$ \$300 Filing Fee & \$ \$3000 Filing Fee & \$ \$ \$3000 Filing Fee & \$ \$ \$3000 Filing Fee & \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Jose E. Arias 954 8619221
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: $ \begin{array}{ccc} $
\$125.00 Filing Fee \$\times \text{\$\text{\$\subset}\$\$}\$
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RJ's Grill, LLC	
(Must end with the words "Limited L	.iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
600 parkview Dr. Apt. 523	600 parkview Dr. Apt. 523
Hallandale Beach. Florida. 33009	Hallandale Beach. Florida. 33009
1.48 minutes and a second a second and a second a second and a second a second and a second a second and a second a second a second and	ered Office, & Registered Agent's Signature:
business entity with an active Florida registration.) The name and the Florida street address of the street a	tegistered Agent. You must designate an individual or mother he registered agent are:
Jose E. Arias	
N A	ame
110	
600 parkview Dr. A	Apt. 523
600 parkview Dr.	Apt. 523 t address (P.O. Box NOT acceptable)
600 parkview Dr.	
600 parkview Dr. A Florida street Hallandale Beach	t address (P.O. Box <u>NOT</u> acceptable)

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

A 11 - W

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

Title:		Name and Address:			
"MGR" = Manage "MGRM" = Mana					
MGR		Jose E. Arias			
	_	600 parkview Dr. Apt. 523			
		Hallandale Beach. Florida. 33009			
MGR		Rafael J. Сепаda			
	_	600 parkview Dr. Apt. 523			
		Hallandale Beach. Florida, 33009			
	-				
	_				
	_				
(Use attachment if	necessary)				
·	• /				
		-	(OPTIO		
r 90 days after the dat REQUIRED SIG	e of filing.)	pecific and cannot be more than five bu	SE(-	•••
;	-69	Leading.	ORETAR AHASS	2069 MAR 12	4
2	oignature of a member o	r an authorized representative of a member.	<u>~</u> ~		ű j
(of this document constitute	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury	OF STAT	:2I HG	
	that the facts stated here Jose E. Arias	in are true.)	ATE RID/	39	
		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)