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Special Instructions to	Filing Officer:	
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FILED 2009 MAY -6 PM 2: 14 SECRETARY OF STATE

C. LEWIS

MAY - 7 2009

EXAMINER

#### **COVER LETTER**

O: Registration Section Division of Corporations	
SUBJECT: PANHANdle PIZZA LLC.	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Eric S. Smith	
Name of Person	
F' /O	
Firm/Company	
4707 Winterdale Dr.	_
Address	
HACE, FL 32571  City/State and Zip Code	
City/State and Zip Code	_
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Eric S. Smith at (443) 336-9282  Name of Person Area Code & Daytime Telephone Number	
Name of Person Area Code & Daytime Telephone Number	
nclosed is a check for the following amount:	
S125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
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:
Panhandle Pizza 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:
6557 Caroline St. Milton, FL Milton, FL Milton, FL
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:  Eric S. Smith  Name  4707 Winterdale Dr  Florida street address (P.O. Box NOT acceptable)  Pace  FL 3357/  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)

## FILED

#### Page 1 of 2

2009 MAY -6 PM 2: 14

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: SECRETARY OF STATE TALLAHASSEE, FLORIDA Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (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 sepresentative 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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)