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Office Use Only

EFFECTIVE DATE 5/23/09



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SECRETARY OF STATE
TALLAHASSEF FINITE

D. BRUCE

JUN 0 1 2009

**EXAMINER** 

# **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	ECT: CHEF SHELDON CATERING CONCEPTS & AFFAI	RS	
	Name of Limited Liability Company		
The en	aclosed Articles of Organization and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	CHEF SHELDON		
	Name of Person		
	CHEF SHELDON CATERING CONCEPTS & AFFAIRS		
	Firm/Company		
	3231 N.W. 13 CT		
	Address		
	FT. LAUDERDALE, FL.33311		
	CITE CHEL DONG COM	Mo	0
	CHEF_SHELDON@YAHOO.COM  E-mail address: (to be used for future annual report notification)	- E	<u> </u>
For fur	rther information concerning this matter, please call:	IAS	09MAY 29 AKII: 30
			9 5
	CHEF SHELDON         at (         954         954-584-9342           Name of Person         Area Code & Daytime Telephone Number	<del>PS</del>	129 AH
		REAL S	. <b>ເ</b>
Enclos	sed is a check for the following amount:	D	
<b>]</b> \$125.	.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Fil Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	of Status	&
	(additional co	py is enclo	sed)
	Mailing Address Registration Section  Street/Courier Address Registration Section		
	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building		
	Tallahassee, FL 32314 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:

### CHEF SHELDON CATERING CONCEPTS & AFFAIRS,LLC

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

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

**Principal Office Address:** 

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

**Mailing Address:** 

953 EAST OAKLAND BLVD OAKLAND PARK, FL		3231 N.W. 13 CT FT. LAUDERDAL	FT. E. FL 33311	
(The Limited Liability Co	egistered Agent, Registered Company cannot serve as its own Registerective Florida registration.)			
The name and the F	lorida street address of the reg	istered agent are:		
	CHEF SHEL	.DON	Ž <sub>C</sub>	0
	Name		- LA	H 6
	3231 N.W. 1	3 СТ	EIA AS	FIL 09MAY 29
	Florida street address (P.O. B	ox NOT acceptable)	RY SEE	
	FT.LAUDERDALE,	FL	200	E M
	City, State, and	Zip	S TA	
liability compar registered agent ar statutes relating t	ed as registered agent and to ac ny at the place designated in this nd agree to act in this capacity. To the proper and complete perf gations of my position as registe	s certificate, I hereb I further agree to co ormance of my dutie	ry accept the appointme omply with the provisio es, and I am familiar wi	ent as ons of all ith and

(CONTINUED)

LRegistered Agent's Signature (REQUIRED)

EFFECTIVE DATE 5/23/09

### 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:
EXECUTIVE MGR	CHEF SHELDON 3231 N.W. 13 CT FT. FT. LAUDERDALE, FL 33311
MGRM	PATTI G FERGUSON 3231 N.W. 13 CT FT. FT. LAUDERDALE, FL.33311
(Use attachment if necessary)	5-/23/05
ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	te of filing:
REQUIRED SIGNATURE:  Signature of a member of	r an authorized representative of a member.
of this document constitut that the facts stated herein	HEF SHELDON 33
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)