· L09000057443

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(Otty/Otate/Zipi/ Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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S. HAWKES
JUN 1 2 2009

EXAMINER

COVER LETTER

TO:	Registration Division of C			
SUBJI	ест: <i>Дос.</i>	key //o+ Doc. Name of Limit	ed Liability Company	
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
		in Morley	Name of Borron	
		,	Name of retson	
			Firm/Company	
	337	Summerset Dr	Address	
			Address	
	5+/	apas, FL 3	2259	
	backer	Cit	y/State and Zip Code m Ca s f. n c f for future annual report notification)	
	- MOCKEY	E-mal/address: (to be used	for future annual report notification)	
For fu	rther information	concerning this matter, please	e call:	
/.	Name	of Person	at (<u>904</u>) <u>287-98</u> Area Code & Daytime Telepho	3 2/ ne Number
Enclo	sed is a check f	or the following amount:		
□\$125	.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 Circ Tallahassee, FL 32301	ele

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
	45 8 T
1/2	ity Company," "L.L.C.," or "LLC.")
(Must end with the words "Limited Liabil	** Co
(Must end with the words Limited Liabit	ny Company, L.L.C., or LLC.)
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
223	·
337 SUMMERSET DR ST JOHNS FL 32259	Same
ST Jakos FL 32239	
ARTICLE III - Registered Agent, Registered	Office & Registered Agent's Signature
(The Limited Liability Company cannot serve as its own Regist	
business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:
12 11-11-11	
John Morley	
Pane	
337 Summerse	+ Dr
Florida street address (P.O.	Box NOT acceptable)
St-blas FL	El 32259
St_blns Fl City, State, ar	nd Zip
	·
	accept service of process for the above stated limited
	his certificate, I hereby accept the appointment as
	o. I further agree to comply with the provisions of all
	rformance of my duties, and I am familiar with and

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

"MGR" = Manag "MGRM" = Mar		Name and Address:
MInl		John Morley 337 Summerset Dr 5+ Johns Fl 32259
MGRM		Cafe Mosley 337 Summer Set DI 32259 34 - 1
		S. S.
effective date is lis 0 days after the da	date, if other than the ted, the date must be ate of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days pr
CLE V: Effective effective date is lis	date, if other than the ted, the date must be ate of filing.) GNATURE:	e specific and cannot be more than five business days pr
CLE V: Effective of the control of t	date, if other than the ted, the date must be ate of filing.) GNATURE:	date of filing: (OPTIONAL) e specific and cannot be more than five business days provided by the second s
CLE V: Effective of the control of t	date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sec	e specific and cannot be more than five business days property of a member. tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury
CLE V: Effective of the control of t	date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member of this document constitute the facts stated here	e specific and cannot be more than five business days property of a newber. tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.)
CLE V: Effective of the control of t	date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member of this document constitute the facts stated here. Type	e specific and cannot be more than five business days property of a member. tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)