

L09000059693

JEAN WALLACE
199 NW 62ND STREET
MIAMI FL 33150

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

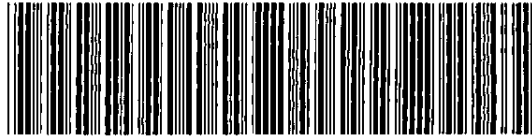
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Office

Office Use Only



700156473847

06/03/09--01027--023 **125.00

06/15/09--01043--018 **35.00

FILED
09 JUN 19 AM 11:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

JUN 19 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2009

JEAN WALLACE
199 NE 62ND STREET
MIAMI, FL 33150

SUBJECT: CHICKEN PLUS LLC
Ref. Number: W09000026227

We have received your document for CHICKEN PLUS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of organization must be prepared in compliance with section 608.407, Florida Statutes. We are enclosing the appropriate forms and instructions for your convenience.

I am enclosing the forms to file as an LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 809A00018814

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CHICKEN PLUS "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:

199 NW 62ND STREET
MIAMI FLORIDA 33150

Mailing Address:

199 NW 62ND STREET
199 NW 62ND STREET
MIAMI FLORIDA 33150

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:

JEAN WALLACE

Name

199 NW 62ND STREET

Florida street address (P.O. Box NOT acceptable)

MIAMI

FL

33150

City, State, and Zip

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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..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR.

JEAN WALLACE
199 NW 62ND STREET
MIAMI FL. 33150

MGRM

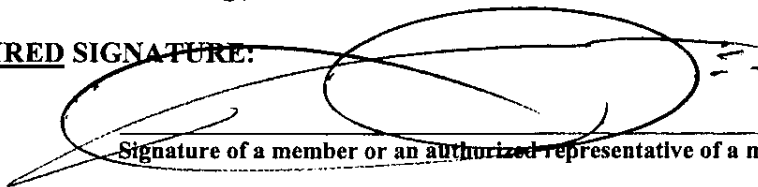
MARY T. WALLACE
199 NW 62ND STREET
MIAMI FL 33150

(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 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.)

JEAN WALLACE

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)

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