(Re	equestor's Name)	
,	,	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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(00	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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C. LEWIS APR 2 2010 **EXAMINER** 

## **COVER LETTER**

TO:	Registration Se Division of Cor		*	og de en	era -	erene er
₩ * SUBJE	ст: <u>Advan</u>	tage Resta Name	uran+ of Limited I	Equipment LiabOty Company	Sale	s LLC
The en	closed Articles of	Organization and for	ee(s) are subi	nitted for filing.		
Please	return all correspo	ndence concerning	this matter to	the following:		·
	Rodney.	J-Zuback	•			
	J		Na	ne of Person		
			Fir	m/Company		
	160 Spri	gwind le	Day	Address		
	Casselbei	ry fl 3	32707 City/Sta	ate and Zip Code		
_		Zulack@ Or	mil (	ture annual report noti	fication)	
For fur	ther information c	oncerning this matt		-		
Ra	Iney J Z Name o	wback Person	at	( <u>407</u> ) <u>(</u> Area Code & Da	17 . (	D664 phone Number
Enclos	ed is a check for	the following am	ount:			
□\$125.	00 Filing Fee	■\$130.00 Filing Certificate of S	Fee & 💆 tatus	\$155.00 Filing Fee Certified Copy (additional copy is end		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address		Street/Courier	Address	

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:
Advantage Restauran + Equipment Sales 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:
Rodney J Zuback  Rodney J Zuback  Ibo Springwind Way  Casselberry F1 32707  ARTICLE III Print I A District I District I I I I I I I I I I I I I I I I I I I
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:  Rodney J Zuback  Name  Range  Rodney J Zuback
Florida street address (P.O. Box NOT acceptable)  OSSEI DEVTY FL 32707  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)
Page 1 of 2

Title:		Nama and Address	SECRETARY	OF ST
"MGR" = Mana	ıger	Name and Address:	TALLAHASSE	E. FLI
	naging Member			
MAR		Rodney J Zuback		
141(2)17	<del></del>	160 Spring Wind Way		
		Casselberry Pl 32007		
		3/-		
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CLE V: Effective effective date is li	e date, if other than the sted, the date must late of filing.)  IGNATURE:  Signature of a memi	be specific and cannot be more than five ber or an authorized representative of a membraction 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perju	business days	.) prio

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)