

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000147081 3)))



H100001470813ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name . : LAZARUS CORPORATE FILING SERVICE

Account Number : 120000000019

Phone : (305)552-5973

Fax Number : (305)220-1440

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

ÆTE EAT	FLORIDA LIMITED LIABILITY CO.
	RESTAURANT & ENTERTAINMENT GROUP. LLC

OJUN 23 PM 3: ECKETARY OF STATE

Certificate of Status

0

Certified Copy

1

Page Count

03

Estimated Charge .

\$155.00

T. CLINE

JUN 24 2010

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

3052201440

## H10000147081

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Let's Far Restaurant a Entertainment Group, L
(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:
9370 SW 31 Tear 9370 SW 31 Tear 9370 SW 31 Tear 33165 E
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:
Jose A. MVROZ
Name
9370 SW 31 TERR
Florida street address (P.O. Box NOT acceptable)
MIAMI FL 33165
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

(CONTINUED) Page 1 of 2

H10000147081

## H10000147081

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Memher  MG LM	Jose A. MUNOZ
	9370 SW 31 TERL
	Minmu, 52 33165
MGR	Jose M. CAlleia
	1 Share Drive East
	MIANU, 12 33132
	• • •
	TALS: 201
	PX (
	SECRETAR) ALLAHASS
(Use attachment if necessary)	
PROPERTY TO BY AND AND A STATE OF THE AND A STATE OF	5 9
ARTICLE V: Effective date, if other than the d	specific and cannot be more than five business days prior
o or 90 days after the date of filing.)	
	/ 🗸
REQUIRED SIGNATURE:	
	$I \setminus I \setminus I$
V	10 10
Signature of a member	or an aumorized representative of a member.
In accordance with sect	ion 608.408(3), Florida Statutes, the execution
of this document constit	utes an affirmation under the penaltics of perjury
that the facts stilled he	H. M. VATAZ
	ed or printed name of signee
	·
Filing Fecs:	

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

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

Page 2 of 2