

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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G. MCLEOD AUG. 2:7 2010

EXAMINER



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COVER LETTER

	tegistration S Division of Co			
SUBJECT	r: Professi	onal Food Service Sale	es LLC	
			ed Liability Company	
The enclos	sed Articles o	f Organization and fee(s) are	submitted for filing.	
Please retu	ırn all corresp	ondence concerning this mat	ter to the following:	
Ro	obert J DeM	lino		
			Name of Person	
Pr	ofessional l	Food Service Sales LLC		
			Firm/Company	
12	303 Hollybi	ush Terrace		
			Address	
La	kewood Ra	nch Florida 34202		
			y/State and Zip Code	
rol	pert.demino	@yahoo.com	for future annual report notification)	
For furthe	r information	concerning this matter, please		
Robert .	J DeMino		at (941)224 1252	
	Name	of Person	Area Code & Daytime Telep	phone Number
Enclosed	is a check fo	or the following amount:		
\$125.00	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$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
Tallahassec, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	TOT	E I	- N	ame
		46.1	_ 14.	ame.

The name of the Limited Liability Company is:

Professional Food Service Sales LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LL.C.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
12303 Hollybush Terrace	PO Box 110454	
Lakewood Ranch Florida	Lakewood Ranch Florida	
34202	34211	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Robert J DeMino	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another of the registered agent are:	er is Assum Grantester
•	Name	demotes
12303 Hollybush Te	rrace To The Trace	
Florida sın	reet address (P.O. Box NOT acceptable)	Serve March
Lakewood Ranch	FL 34202	
- ·	City, State, and Zip	

Having been named us 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

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managin	Member ·
MGR	Robert J DeMino
	12303 Hollybush Terrace
	Lakewood Ranch Florida 34202
MGRM	Frances J DeMino
	12303 Hollybush Terrace
	Lakewood Ranch Florids 34202
•	
(Use attachment if neo	essary)
(,
ARTICLE V: Effective date,	if other than the date of filing: (OPTIONAL)
	the date must be specific and cannot be more than five business days prior
to or 90 days after the date of	filing.)
DECEMBED CLOSE	TOTAL TO BE .
REQUIRED SIGNA	IURE:
Sigh	ature of a member or an authorized representative of a member.
	ccordance with section 608.408(3), Florida Statutes, the execution is document constitutes an affirmation under the penalties of perjury

Filing Fees:

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

Robert J DeMino

that the facts stated herein are true.)

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

Typed or printed name of signee