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J. SAULSBERRY EXAMINER

OCT 13 2010

COVER LETTER

Division of Corporations
SUBJECT: READY TO EAT CASE LLC. Name of Limited Liability Company
Ivalie of Elithica Elacinity Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mayor Carange
MICHAEL GOLDBERGER Name of Person
down to the contract of
Firm/Company
LEADY TO EXT CAFE UC Firm/Company 4140 LANSING AVENUE Address Address
4140 LANSING FRENCE
Cooled Cry, F. 33026 City/State and Zip Code Address Agg 25 City/State and Zip Code
Cooled Cry, F. 33026 City/State and Zip Code MSGFL D ADL. COM E-mail address: (to be used for future annual report notification)
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Goldbergel at 954 298-6661 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
/
\$125.00 Filing Fee \$\bigs\tag{\footnote{\pi}}\$130.00 Filing Fee &\bigs\tag{\footnote{\pi}}\$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy (additional copy is enclosed)
(additional copy is chelosed)
Mailing Address Street/Courier Address
Registration Section Registration Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 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:

READY TO EAT CAFE UC. (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: 4140 LANSING AVENUE ConfERCITY For 33026 Mailing Address: 4140 LANSING AVENUE ConfERCITY For 33026
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:
MICHAEL—GOLDBERGER Name 4140 LANSING AVE Florida street address (P.O. Box NOT acceptable) Coolel City FL 33026 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)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	MICHAEL GOLDBERGER 4140 LANSING AVENUE COOPER CITY, FL 33026
	
	SECRETA ALLAHAS
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(Head the almost if appearance)	
(Use attachment if necessary) CLE V: Effective date, if other than the	the date of filing: (OPTIONAL
CLE V: Effective date, if other than the	<u> </u>
CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE:	the date of filing: (OPTIONAL
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with section of constitutes an affirmation un I am aware that any false inficonstitutes a third degree felories.	the date of filing: (OPTIONAL to be specific and cannot be more than five business days

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)