

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC  
Account Number : 120010000112  
Phone : (302) 575-0875  
Fax Number : (302) 575-0925

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**

**Bella Restaurant Consultants LLC**

Certificate of Status	0
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EXAMINER

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **Bella Restaurant Consultants LLC**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: **5309 Florence Harbor Dr., Orlando, FL 32829.**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

**Agents and Corporations, Inc.  
300 Fifth Avenue South  
Suite 101-330  
Naples, FL 34102**

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.

**Agents and Corporations, Inc.**

By: *John L. Williams*  
**By: John L. Williams, Vice President**

**ARTICLE IV - Management (Check box if applicable.) [ ]**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**ARTICLE V - Manager:**

The Initial Manager(s) of the Limited Liability Company shall be:

**Cheryl A. McCoy Autumn M. McCoy Alex T. Brugger**

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.)

*ALEX T. BRUGGER*  
Typed or printed name of signer

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