

#L 11000030891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

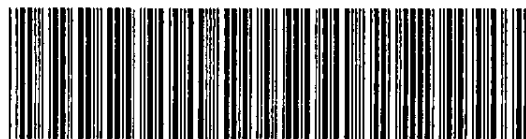
(Business Entity Name)

(Document Number)

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K. SALLY  
EXAMINER  
MAR 14 2011

# LISA & SOUSA, LTD.

ATTORNEYS AT LAW

(A PROFESSIONAL CORPORATION)

5 Benefit Street  
Providence, Rhode Island 02904  
Telephone (401) 274-0600  
Facsimile (401) 421-6117

Carl B. Lisa  
Louis A. Sousa •  
Carl B. Lisa, Jr. •  
John J. Poloski, III •  
Sandra Sousa-Marujo •  
Thomas E. Romano •

Robert G. Branea, Jr. •  
Eugene A. Amelio •  
of Counsel

• (Also Member of Massachusetts Bar)  
• (Also Member of District of Columbia Bar)

March 9, 2011

**Via: Federal Express**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**Re: MOM'S GRILL & PIZZA, LLC**  
**Our File No. New**

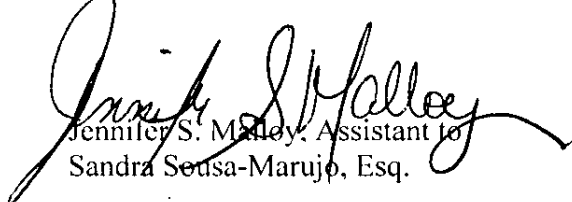
To Whom It May Concern:

Enclosed please find a check in the amount of \$155.00 representing the amount due for the filing fee, Certificate of Status and Certified Copy of the Articles of Organization to form the above-referenced companies. Please return the Certified Copies of the Articles of Organization and Certificates of Status to this office in the enclosed self-addressed federal express envelope provided.

Please call with any questions.

Very truly yours,

LISA & SOUSA, Ltd.



Jennifer S. Malloy, Assistant to  
Sandra Sousa-Marujo, Esq.

Enclosure  
/jsm

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MOM'S GRILL & PIZZA, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Sousa-Marujo, Esquire

Name of Person

Lisa & Sousa, Ltd.

Firm/Company

5 Benefit Street

Address

Providence, Rhode Island 02904

City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Sousa-Marujo, Esquire

Name of Person

at ( 401 ) 274-0600

Area Code & Daytime Telephone Number

Enclosed is a check for 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**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Mar 08 11 07:29p

Manuel Andrade

5616277679

03/08/2011

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

**MOM'S GRILL & PIZZA, 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:

1301 Royal Palm Beach Boulevard  
Royal Palm Beach, Florida 33411

#### Mailing Address:

Same

### 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:

**Manuel S. Andrade**

Name

**53 St. Thomas Drive**

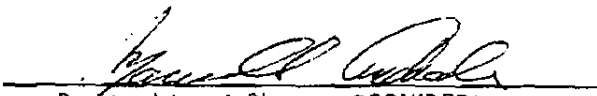
Florida street address (P.O. Box **NOT** acceptable)

**Palm Beach Gardens FL 33418**

City, State, and Zip

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TALLAHASSEE, FLORIDA

*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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGRManuel S. Andrade53 St. Thomas DrivePalm Beach Gardens, Florida 33418MGRFrank Romeo1301 Royal Palm Beach BoulevardRoyal Palm Beach, Florida 33411

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Immediately upon filing (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**  
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Manuel S. Andrade

Typed or printed name of signee

**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)