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Special Instructions to Filing Officer:

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EXAMINER

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ECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JETZ Burger Dog, L	LC
	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:
Laurean Vincent	
	Name of Person
	Firm/Company
13799 Park Blvd. #245	
	Address
Seminole, FL 33776	
Commone, TE COTTO	City/State and Zip Code
beachrunner5@hotmail.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	lease call:
Laurean Vincent	at (727) 460-9485
Name of Person	Area Code & Daytime Telephone Number
England in a sheet for the Callering amount	
Enclosed is a check for the following amoun	_
\$125.00 Filing Fee []\$130.00 Filing Fee & Certificate of Statu	
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section	Registration Section
Division of Corporation P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	4 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company	y is:
JETZ Burger Dog, LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1543 Jonathan Ct.	13799 Park Blvd. #245
Largo, FL 33770	Seminole, FL 33776
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of t	he registered agent are:
Laurean Vincent	
Na	ame
1543 Jonathan	Ct

Florida street address (P.O. Box NOT acceptable) _{FL} 33770

City, State, and Zip

Largo

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..

ed Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

"MGR" = Manager "MGRM" = Managing Member	
MGRM	Laurean Vincent
	1543 Jonathan Ct.
	Largo, FL 33770
MGR	Steve Callander
	1543 Jonathan Ct.
	Largo, FL 33770
(Use attachment if necessary)	
LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.)	the date of filing: (OPTION st be specific and cannot be more than five business date of the specific and cannot be more than five business date of the specific and cannot be more than five business date.
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.)

Laurean Vincent

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)