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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: BEVER	RAGE 60 LLC		
Name of Limited Liability Company			
The content Author &	·	automitted for Clina	
	Organization and fee(s) are		
Please return all correspon	ndence concerning this mat	ter to the following:	
GEORGE TRENEN BUSH			
		Name of Person	
GEORGE	TRENEN BUSH	H CPA & CO., P. A.	
		Firm/Company	
205 AVEN	UE K SE		
 	·	Address	
WINTER HA	VEN, FL 33880		
City/State and Zip Code			
GTB_GTBCPA@YAHOO.COM			
E-mail address: (to be used for future annual report notification)			
For further information co	oncerning this matter, pleas	e call:	
GEORGE TRENE	N BUSH	at (863) 401-8866	•
Name of	Person	Area Code & Daytime Telep	shone Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 C Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: BEVERAGE 60 LLC				
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited L	Liability Company is:		
Principal Office Address:	Mailing Address:			
17314 EMERALD CHASE DR. TAMPA, FL 33647	17314 EMERALD CHASE I TAMPA, FL 33647	OR.		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	red Agent. You must designate an indi	's Signature: vidual or another		
GEORGE TRENEN BUS				
Name	<u> </u>			
205 AVENUE K SE				
Florida street address (P.O. Box NOT acceptable)				
WINTER HAVEN,	_{FL} 33880			
City, State, and Zip				
Having been named as registered agent and to accept the obligations of my position as registered. Registered Agent's Signature	is certificate, I hereby accept to I further agree to comply with formance of my duties, and I agreed agent as provided for in (the appointment as the the provisions of all the familiar with and Chapter 608, F.S		
(CONTINU	ED)	APR 20 CRETARY AHASSE		

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	VIJAY GANDHI
· -	17314 EMERALD CHASE DR. TAMPA, FL 33647
	TAMPA, FL 33047
(Use attachment if necessary) RTICLE V: Effective date, if other than a lift an effective date is listed, the date must or 90 days after the date of filing.)	the date of filing: MAY 1, 2011 (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	38 de
	nber or an authorized representative of a member.
(In accordance with section of constitutes an affirmation up I am aware that any false in	608.408(3), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
	Vijay Gardhi 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)