

# L11000063559

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H11000142715 3)))



H110001427153ABCW

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

From: Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608) 827-5300  
Fax Number : (608) 827-5501

FILED  
2011 MAY 31 AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Email Address: andrewn186@aol.com

RECEIVED  
11 MAY 31 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.**  
**Manwarren Concessions, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

**C. LEWIS**

JUN 1 2011

**EXAMINER**

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

FAX AUDIT # H11000142715 3

**ARTICLES OF ORGANIZATION  
OF  
Manwarren Concessions, LLC**

**FILED**  
**2011 MAY 31 AM 8:10**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ARTICLE I NAME**

The name of the limited liability company shall be: Manwarren Concessions, LLC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be:  
10039 62nd Ave North Bld 8 Unit 4, St Petersburg, Florida 33708.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Business Filings Incorporated, 1203  
Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of  
Leon.

**ARTICLE IV DURATION**

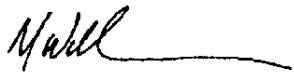
The duration for the limited liability company shall be: Perpetual.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the managing members and the  
names and addresses of the members of the Limited Liability Company are:

Andrew Manwarren, 10039 62nd Ave North Bld 8 Unit 4, St Petersburg, Florida 33708

Chantelle Ferreira Manwarren, 10039 62nd Ave N Bld 8 Unit 4, St Petersburg, Florida 33708

  
Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,  
WI 53717

608-827-5300

Date: May 31, 2011

FAX AUDIT # H11000142715 3

FAX AUDIT # H11000142715 3

FILED

2011 MAY 31 AM 10:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

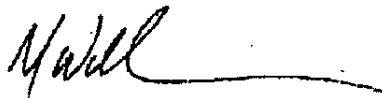
CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE  
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Manwarren Concessions, LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203  
Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of  
Leon.

Having been named as registered agent and to accept service of process for the above stated  
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.



Signature: \_\_\_\_\_

Mark Williams, A.V.P. *Business Filings Incorporated*

Date: May 31, 2011

FAX AUDIT # H11000142715 3