

L11000075358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

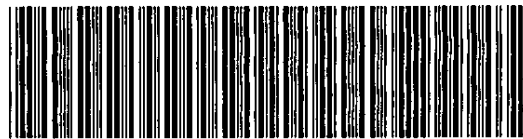
Special Instructions to Filing Officer:

L11000033346

Office Use Only

EFFECTIVE DATE

6/27/11



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06/20/11--01020--010 **125.00

FILED
11 JUN 28 AM 7:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 29 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2011

MICHELLE RAPP
12220 TOWNE LAKE DRIVE #10
FT. MYERS, FL 33913

SUBJECT: GATEWAY PIZZA FACTORY, LLC
Ref. Number: W11000033346

We have received your document for GATEWAY PIZZA FACTORY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on June 20, 2011. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 211A00015010

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11 JUN 28 AM 7:35
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gateway Pizza Factory, 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:

Michelle Rapp
Name of Person

BNT Enterprises limited, Inc.
Firm/Company

12220 Towne Lake Dr. #10
Address

Ft. Myers, FL 33913
City/State and Zip Code

Mrsrapp@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Rapp at (239) 225-5543
Name of Person 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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gateway Pizza Factory, 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:

12220 Towne Lake Dr.
Suite #22
Fort Myers, FL 33913

Mailing Address:

12220 Towne Lake Dr.
Suite #10
Fort Myers, FL 33913

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:

Jackie M. Rapp
Name

12825 Kingsmill Way
Florida street address (P.O. Box **NOT** acceptable)

Fl. Myers FL 33913
City, State, and Zip

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..

Jackie M. Rapp
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 6/27/11

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:

Robert F. Rapp MGRM 12825 Kingsmill Way
Ft. Myers, FL 33913

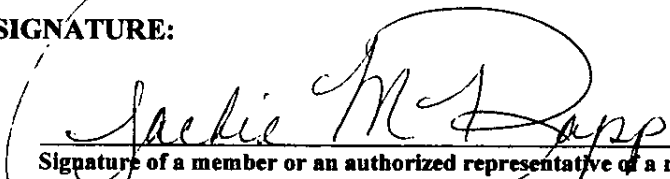
Jackie M. Rapp MGR 12825 Kingsmill Way
Ft. Myers, FL 33913

Lauren M. Stewart 12825 Kingsmill Way
MGR Ft. Myers, FL 33913

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6/27/11 (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.)

Jackie M Rapp
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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUN 28 AM 7:35