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ALLAHASSEE, FLORIDA

D. BRUCE
JUL 25 2011
EXAMINER

COVER LÉTTER

TO:

Registration Section

Division of	f Corporations				
SUBJECT. Rer	no's Roast Beef				
Sobsect.		d Liability Comp	any		
The enclosed Article	es of Organization and fee(s) are s	submitted for filin	g.		
Please return all cor	respondence concerning this matte	er to the following	; :		
Mary E	Reno				
		Name of Person			
Reno's	Roast Beef				
		Firm/Company			
207 Dy	kes Drive				
 		Address			
Tavares	Florida 32778				
	 	/State and Zip Code	>		
wreno@r	netzero.net	**************************************		AR JE	7
	E-mail address; (to be used for	•	ort notification)	22 TAR ASS	
For further informati	ion concerning this matter, please	cail:		Y OF	Π
Mary Reno	, 	at (352	617 3780	TO AND	
Na	me of Person	Area Code	& Daytime Telephone Numb	TATE ORIDA	
Enclosed is a checl	k for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Copy (additional copy	py Certifical y is enclosed) Certified	Filing Fee, te of Status & I Copy I copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton B 2661 Exe	on Section of Corporations uilding cutive Center Circle see, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
Reno's Roast Beef LLC	,
(Must end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
207 Dykes Drive	207 Dykes Drive
Tavares , Fla.	Tavares , Fla.
32778	32778
	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
William R. Reno	A
	Name
207 Dykes D	rive AHAS
Florida s	street address (P.O. Box NOT acceptable)

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

Tavares

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member **MGRM** Mary E. Reno 207 Dykes Drive Tavares, Fla. 32778 **MGRM** William R. Reno 207 Dykes Drive Tavares, Fla. 32778 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of 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.)

(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.)

Signature of a member or an authorized representative of a member

Mary E. Reno

Typed or printed name of signee

Filing Fees:

REQUIRED SIGNATURE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)