

L11000106338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

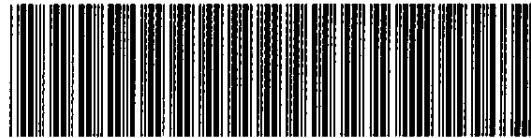
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W11000046385

Office Use Only

EFFECTIVE DATE 8/31/11



700211811477

09/07/11--01011--020 **125.00

FILED
11 SEP -7 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 16 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 8, 2011

RICHARD YOUNG
37771 HENRY SMITH RD
HILLIARD, FL 32046

SUBJECT: CUZZ'S BBQ AND MORE L.L.C.
Ref. Number: W11000046385

We have received your document for CUZZ'S BBQ AND MORE L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the entity's complete mailing address.

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 September 7, 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: 911A00020836

FILED
11 SEP - 7 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cuzz's BBQ and More L.L.C.
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:

Richard Youmans
Name of Person

Cuzz's BBQ and More L.L.C.
Firm/Company

37771 Henry Smith Rd
Address

Hilliard FL 32046
City/State and Zip Code

Richard Youmans@windstream.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindy Youmans at (904) 845-4493
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

FILED
11 SEP -7 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cuzz's BBQ and More L.L.C.

(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:

Mailing Address:

Cuzz's BBQ and More LLC 37771 Henry Smith Rd
37771 Henry Smith Rd Hilliard, FL
Hilliard FL 32046 32046

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:

Richard Youmans

Name

37771 Henry Smith Rd

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

Hilliard FL 32046

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 SEP - 7 PM 2:46

FILED

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..

x Richard Youmans
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

MGR

Richard Youmans
37771 Henry Smith Rd
Hilliard FL 32046

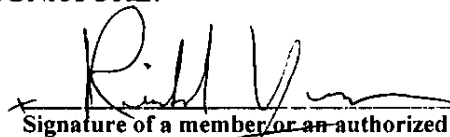
MGRM

Cindy Youmans
37771 Henry Smith Rd
Hilliard FL 32046

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 8-31-2011 (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.)

Richard Youmans
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)

FILED
SEP - 7 PM 2:46
CLERK OF STATE
TALLAHASSEE, FLORIDA