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**EXAMINER** 



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SECHETARY OF STATE

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Tony's Seafood Mart, 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:
Ton Van Mai
Name of Person
Firm/Company
1683 State Ave
Address
Holly Hill, F) 32117  City/State and Zip Code
·
donna 420 neely a hotmanl. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donna Neely at (386) 547-8808  Name of Person at (386) S47-8808  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Tony (Must end w	's Seafood vith the words "Limited Liabili	Mart, LLC ty Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and		incipal office of the Limited Li	ability Comp	any is:
Principal Office Addres	s:	Mailing Address:		
	red Agent, Registered cannot serve as its own Registe	Office, & Registered Agent's  red Agent. You must designate an individual	s Signature:	
The name and the Florida	street address of the re	egistered agent are:		
	Ton Van Mai	<u> </u>	FACE 72	
	Name  683 State /  Florida street add	Ave. ress (P.O. Box <u>NOT</u> acceptable)	12 JAN-9 PH SECKETARY OF ALLAHASSEE. F	

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..

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MG RM	Ton Van Mai #5 Deer Skin Un
MGR	Ormond Beach, Fl 32174  Chien Dinh Mai 821 State Rd #44  NSB, Fl 32168
MGR	Co Nguyen  252 Gala Cir  DB Fl 32124
	DB, FI 32124
(Use attachment if necessary)	
	the date of filing: <u>Jan 1,2012</u> . (OPTIONAL) at be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
1009	1ru/ ////

(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.

Ton Von Mou

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)