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EXAMINER

COVER LETTER

	on Section f Corporations		
SUBJECT:	Jazzie's Diner, LL	C	
SOBJECT.	Name of Limited	Liability Company	
The enclosed Article	es of Organization and fee(s) are su	bmitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	Jack A. Seckel	ame of Person	
	Jazzies Din	es .	
	2188 Candleh	irm/Company	
	_		<i></i>
		Florida 3230 diate and Zip Code	Acceptance of the second of th
	JackSeckel@con	ncast net	7
For further informat	ion concerning this matter, please c	all:	ASSET OF THE
<u>Jack</u>	Sectel ame of Person	at (<u>850</u>) <u>556-</u> Area Code & Daytime Telep	1752 FS 3
Enclosed is a check	k 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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Jazzie's Diner, "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 Li	iability Company is
Principal Office Address: Mailing Address:	
2188 Candlewyck Ct. 2188 Candlewyck (Tallahassec, FL 32308 Tauchassec, Florio	Ct. LL 32308
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indiviousiness entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	12 12
JACK A. SECKEL Name	
	ARY ARY
Florida street address (P.O. Box NOT acceptable)	PH 3 00
Tallahassee, FL 32308 City, State, and Zip	0

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..

(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:

"MGR" = Mana "MGRM" = Ma		Name and Address:	
MGR		Jack A. Seckel 2188 Cardlewyck Ct. Talabassec, Ft 32308	
MGRM		Mildred H. Seckel 2188 Candlewyck Ct. Tallahassee, Fr 32308	
			
(Uso attachment	if necessary)		
(Use attachment ETICLE V: Effective an effective date is list or 90 days after the d	date, if other than the dated, the date must be	late of filing: (OPTIONAl specific and cannot be more than five business days	L) s prio
TTICLE V: Effective an effective date is lis	date, if other than the dested, the date must be ate of filing.) GNATURE:	ate of filing:	L)

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)