## #12000060240

(Requestor's Name)
(Address)
(Address)
(Ot 10th Fil. 10th - 4)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Doddinoite (Validos))
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300234978913

05/15/12--01005--007 \*\*125.00

PHAY 15 PH 2: 41

K.SALY EXAMINER MAY 16 2012

## **COVER LETTER**

10: Registration Division of C			
SUBJECT. Game	e Day Barbeque, L	.LC	
SUBJECT:		d Liability Compar	ny
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
Raymon	d Seals		
		Name of Person	
		Firm/Company	
664 NW	Shaw Glen	· ······· Company	,
004 1111	Shaw Glen	Address	
Lake City,	FL 32055		
<u>Lake Oity,</u>		/State and Zip Code	·
RaySeals@	hotmail.com		
	E-mail address: (to be used for	or future annual repor	rt notification) .
For further information	n concerning this matter, please	call:	
Raymond Seals		at (386	697-5260
Name	e of Person	Area Code	& Daytime Telephone Number
Enclosed is a check	for the following amount:		
<b>√</b> \$125.00 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Game Day Barbeque, LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
664 NW Shaw Glen	
Lake City, FL 32055	
(The Limited Liability Company cannot serve as its own Registration.)  The name and the Florida street address of the restaurant of the Starr/Starr Law Off Name  8181 U.S. Highwa	egistered agent are: fices, P.A.  ay 19 N.  Figure 12 12 12 12 12 12 12 12 12 12 12 12 12
Pinellas Park	ress (P.O. Box NOT acceptable)
	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

IGR" = Manager IGRM" = Managing Member BRM	
GRM	
	Raymond Seals
	664 NW Shaw Glen
	Lake City, FL 32055
<del></del>	
se attachment if necessary)	
•	date of filing: (OPTIONAl specific and cannot be more than five business day
EV: Effective date, if other than the stive date is listed, the date must be says after the date of filing.)  EQUIRED SIGNAPURE:	date of filing: (OPTIONAl specific and cannot be more than five business day
EV: Effective date, if other than the extive date is listed, the date must be ays after the date of filing.)  EQUIRED SIGNAPURE:  Signature of a member of a membe	12a G

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)