L12000114772

(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:

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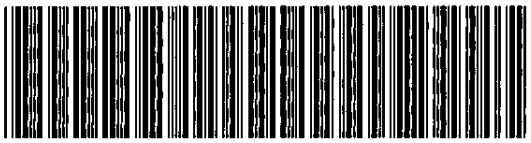

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12 SEP -6 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Douglas Family Catering 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:

Joanna Douglas
Name of Person

Douglas Family Catering, LLC
Firm/Company

3819 E. Norfolk St.
Address

Tampa, Florida 33604
City/State and Zip Code

jdouglas42@verizon.net (jdouglas42@verizon.net)
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joanna Douglas at (813) 985-7504
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Douglas Family Catering LLC
(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:

YOLANDA P. LUCAS
2560 HUNLEY LOOP
KISSIMMEE, FL 34743

Mailing Address:

JOANNA DOUGLAS
3819 E. NORFOLK ST.
Tampa, FL 33604

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:

YOLANDA P. LUCAS
Name

2560 HUNLEY LOOP
Florida street address (P.O. Box **NOT** acceptable)

KISSIMMEE, FL 34743
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

Yolanda P. Lucas
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:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGR	Kevin Douglas 1531 N. Lawton St., Apt. 4301 Tampa, Florida 33606
MGR	Lawton Douglas, Jr. 2808 E. Hillsborough Ave Tampa, FL 33610
MGR	Joanna Douglas 3819 E. Nebraska St Tampa, FL 33604
MGR	Anthony Long 1910 Bridgehampton Place Brandon, FL 33511

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 31, 2012. (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.)

Joanna Douglas
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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Yvonne Long 1910 Bridgehampton Place Brandon, FL 33511
MGRM	Jacky Cay 5301 Cloverhill Road Temple Terrace, FL 33617
MGRM	Yolanda Lucas 2560 Huxley Loop Kissimmee, FL 34743

(Use attachment if necessary)

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Joanna Douglas
Typed or printed name of signee

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