L12000/60988

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	W.AIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only

EFFECTIVE DATE 0/61/13



600242948806

12/26/12--01008--016 **130.00

2012 DEC 26 PM 3: 48
SECHETARY OF STATE
TALLAHASSEF FI GRIDA

D. BRUCE
DEC 27 2012
EXAMINER

(850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Food & Fire Safety Consulting, 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:

riease return an correspon	idence concerning and made	er to the followin	g.			
Joby Pu	llappally					
		Name of Person				
Food & I	Fire Safety C		ig, LLC			
	·	Firm/Company				
2602 Qu	ieen Alberta	Dr				
		Address				
Valrico,	FL 33596				SEC	2012 (
	Cit	y/State and Zip Co	de	<u> </u>	至	EC
pullapj2@g					ASS ASS	DEC 26
	E-mail address: (to be used t	or future annual re	port notification)		uo uz	
For further information co	ncerning this matter, please	call:			F Si	PH 3
Joby Pullap	pally	, 727	, 643-8 ⁻	708	STATE	3: 48
Name of	Person	Area Co	de & Daytime Tele	phone Number		
Enclosed is a check for	the following amount:					
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fil Certified C (additional co	_	\$160.00 Fill Certificate Certified C (additional co	of Statu Copy	ıs &
	Mailing Address	Street/9	Courier Address			

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 - N The name of the	lame: Limited Liability Compa	ny is:	
Food & Fire Safety	Consulting, LLC		
	(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing add		the principal office of the Limited Lie	ability Company is:
Principal Offic	e Address:	Mailing Address:	
2602 Queen Alberta	ı Dr	P.O. Box 2521	
Valrico, FL 33596		Valri∞, FL 33595	
business entity with	an active Florida registration.)	n Registered Agent. You must designate an indivi	2012 DEC 26 SECRETARY
	•	Name	AA C
	2602 Queen Alberta Dr		SEA 9
	. Florida str	reet address (P.O. Box NOT acceptable)	
	Valrico, 33596	FL	26 PM 3: 48 TARY OF STATE ASSEE FLORIDA
	(City, State, and Zip	0 4 37. 84
liability com registered age all statutes re	pany at the place designate nt and agree to act in this lating to the proper and co	and to accept service of process for the ed in this certificate, I hereby accept to capacity. I further agree to comply with a performance of my duties, and as registered agent as provided for in	he appointment as ith the provisions of l I am familiar with

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 0/01/13

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		Name and Address:
"MGRM" = Managi	ng Member	
MGR		Joby Pullappally
		P.O. Box 2521
		Valrico, FL 33595
······································		
		· · · · · · · · · · · · · · · · · · ·
	•	
(Use attachment if n	ecessary)	-
(Use attachment if n	ecessary)	-
LE V: Effective date	e, if other than the	te date of filing: January 1, 2013 . (OPTION
LE V: Effective date	e, if other than the	ne date of filing: January 1, 2013 . (OPTION st be specific and cannot be more than five busin
LE V: Effective date	e, if other than the	
LE V: Effective date	e, if other than the	
LE V: Effective date ffective date is liste or 90 days after the	e, if other than the d, the date muse date of filing.)	
	e, if other than the d, the date muse date of filing.)	
LE V: Effective date ffective date is liste or 90 days after the	e, if other than the d, the date muse date of filing.)	
LE V: Effective date ffective date is liste or 90 days after the REQUIRED SIGN	e, if other than the d, the date must date of filing.) ATURE:	
LE V: Effective data ffective date is liste or 90 days after the REQUIRED SIGN	e, if other than the d, the date must date of filing.) ATURE:	St be specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be specifically and cannot be specific and cannot be specific and cannot be specifically and cannot be specific and cannot be specific and cannot be specific and cannot be specific and cannot be specif
LE V: Effective date ffective date is liste or 90 days after the REQUIRED SIGN Sign (In accordance)	e, if other than the d, the date must e date of filing.) ATURE: gnature of a membrance with section 60 an affirmation unde	per or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document; er the penalties of perjury that the facts stated herein are time.
LE V: Effective date ffective date is liste or 90 days after the REQUIRED SIGN Sign (In accordance constitutes I am aware	e, if other than the d, the date must e date of filing.) ATURE: gnature of a membrance with section 60 an affirmation under that any false information the	per or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document per the penalties of perjury that the facts stated herein are true. 18.408(3) matrix of perjury that the facts stated herein are true. 18.408(3) matrix of perjury that the facts stated herein are true. 18.408(3) matrix of perjury that the facts stated herein are true. 18.408(3) matrix of perjury that the facts stated herein are true. 18.408(3) matrix of perjury that the facts stated herein are true.
LE V: Effective date ffective date is liste or 90 days after the REQUIRED SIGN Signature (In accordance constitutes) I am aware constitutes	e, if other than the d, the date must e date of filing.) ATURE: gnature of a membrance with section 60 an affirmation under that any false information the	per or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document; er the penalties of perjury that the facts stated herein are time.

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)