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COVER LETTER

TO:

Registration Section Division of Corporations

Saratoga Joe's "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:

Joseph A Malanay O

		Name of Person	
		Firm/Company	
14151 F	Roof Street		
		Address	
Ft. Mye	rs, Florida 339	905	7 S 20
*	Ci	ty/State and Zip Code	CHE
jeannema	loney11@gmail.co	m	HAD T
<u> </u>	E-mail address: (to be used	for future annual report notification	SSE -
or further information	concerning this matter, please	e call:	
Jeanne Ru	ıffo Maloney	239 690-1	OF STATE OF
Name	of Person	Area Code & Daytime To	elephone Number
inclosed is a check for	or the following amount:		
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy	■ \$160.00 Filing Fee, Certificate of Status &

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Saratoga Joe's, "LLC."	
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	<u>.</u>
	principal office of the Limited Liability Company is:
•	
Principal Office Address:	Mailing Address:
12140 Metro Parkway, Suite A, Ft Myers FL, 33966	14151 Roof Street
Suite A	Ft. Myers, FL 33905
Ft. Myers, Fl. 33966 ARTICLE III - Registered Agent, Registe	
Ft. Myers, Fl. 33966 ARTICLE III - Registered Agent, Registe	registered Agent. You must designate an individual or another the registered agent are:
Ft. Myers, Fl. 33966 ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	registered Agent. You must designate an individual or another the registered agent are:
Ft. Myers, Fl. 33966 ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	registered Agent. You must designate an individual or another the registered agent are:
Ft. Myers, Fl. 33966 ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Jeanne Ruffo Maloney Na 14151 Roof Street	registered Agent. You must designate an individual or another the registered agent are:
Ft. Myers, Fl. 33966 ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Jeanne Ruffo Maloney Na 14151 Roof Street	registered Agent. You must designate an individual or another the registered agent are:

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.

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(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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Joseph A. Maloney
	14151 Roof Street
	Ft. Myers, Florida 33905
MGR	Jeanne Ruffo Maloney
	14151 Roof Street
	Ft. Myers, Fl. 33905
MGRM	Robert E. Maloney
	31 Coxboro Road (PO BOX 730)
	Holderness, NH 03245-0730
(Use attachment if necessary)	· data of Gilings (OPTIONIAL)
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must prior to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) st be specific and cannot be more than five business days
REQUIRED SIGNATURE:	Ruth Malow W. Assarta
Signature of a memb	er or an authorized representative of a member.
(In accordance with section 60 constitutes an affirmation unde I am aware that any false infor	8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State on as provided for in s.817.155, F.S.)
Jeanne Ruffo Maloney	y, Member
T	yped 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)