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COVER LETTER

TO: **Registration Section Division of Corporations** 6200 Haines 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: Peter C Fischbach Name of Person We Buy Local Restaurants, LLC Firm/Company 146 Second Street North, Suite 310 Address Saint Petersburg, Florida 33701 City/State and Zip Code peter@webuylocalrestaurants.biz E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Peter Fischbach Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: ■\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy 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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
6200 Haines LLC		
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	rincipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
We Buy Local Restaurants, LLC	We Buy Local Restaurants, LLC	
146 Second Street N, Ste 310	146 Second Street N #310	
St. Petersburg, FL 33701	St. Petersburg, FL 33701	
	te 310 dress (P.O. Box NOT acceptable)	
Saint Petersburg, Florida 33701		
liability company at the place designated in t registered agent and agree to act in this capac all statutes relating to the proper and complet and accept the obligations of my position as re	accept service of process for the above stated limited this certificate, I hereby accept the appointment as sity. I further agree to comply with the provisions of the performance of my duties, and I am familiar with 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:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er
MGRM	Peter C Fischbach
	146 Second Street North, Suite 310
	Saint Petersburg, Florida 33701
g	
(Use attachment if necessary)	
	han the date of filing: November 15, 2013 (OPTIONAL)
(If an effective date is listed, the date prior to or 90 days after the date of fi	te must be specific and cannot be more than five business days ling.)
REQUIRED SIGNATURE:	rec
	Recd'
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.)

Peter C Fischbach

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)