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(((H13000260494 3)))



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## FLORIDA LIMITED LIABILITY CO. INTERNATIONAL RESTAURANT NETWORK, LLC

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Electronic Filing Menu Corporate Filing Menu

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## H13000280494

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 CHRISTOPHER HOFFMAN 14355 S.W. 120th Street, Suite 103 Miemi, Florida 33186 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (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 5.817.155, F.S.)

Filing Fees:

5125.00 Fifing Fee for Articles of Organization and Designation of Registered Agent

CHRISTOPHER HOFFMAN

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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Typed or printed name of signee

## H13000260494

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Com	pany is:	
INTERNATIONAL RESTAURANT NETWORK, L		
(Must end with the words "Lin	nited 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:	Mailing Address:	
14355 S.W. 120th Street, Suite 103	14355 S.W. 120th Street, Suite 103	
Miami, Florida 33186	Miami, Florida 33186	
The name and the Florida street address  CHRISTOPHER HOFFN  14355 S.W. 120th Street	Name Name	
	14355 S.W. 120th Street, Suite 103  Florida street address (P.O. Box NOT acceptable)	
Miami	FL 33186 PD ≥ C	
liability company at the place design registered agent and agree to act in the all statutes relating to the proper and accept the obligations of my post	City, State, and Zip  and to accept service of process for the above stated limited and in this certificate. I hereby accept the appointment as a capacity. I further agree to comply with the provisions of complete performance of my duties, and I am familiar with on as registered agent as provided for in Chapter 608, F.S	
(C	CONTINUED)	

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