

L14000031906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

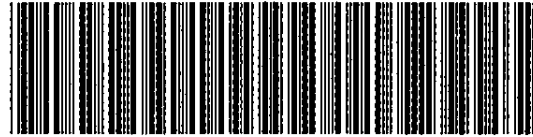
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600256988326

02/24/14--01015--004 **130.00

FILED
2014 FEB 24 A 10 14
FEB 24 2014

B. BOSTICK
FEB 25 2014
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PALM BEACH PROTEIN PARTNERS
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:

PATRICK B. KELLY
Name of Person

G.T. KELLY GENERAL CONTRACTORS INC.
Firm/Company

1935 COMMERCE LN #5
Address

JWITTER FL 33458
City/State and Zip Code

PATRICK B KELLY @ AOL.COM GTKELLYG.C@ BELL SOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICK KELLY at (561) 743-7381
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:

PALM BEACH PROTEIN PARTNERS 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:

1935 COMMERCE LN #5
Jupiter FL 33458

Mailing Address:

1935 COMMERCE LN #5
Jupiter FL 33458

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:

PATRICK R. KELLY
Name
1935 COMMERCE LN #5
Florida street address (P.O. Box NOT acceptable)
JUPITER FL 33458
City Zip

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 605, F.S..

Patrick R. Kelly
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
JUL 21 2011
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

GEORGE T. KELLY IV
1935 COMMERCIAL LN #5
JUPITER FL 33457

AMBR

DONALD T. DILLER
943 OAK HARBOUR DR
JUNO BEACH FL 33408

AMBR

DONALD T. DILLER III
943 OAK HARBOUR DR
JUNO BEACH FL 33408

MGR

PATRICK B. KELLY
1935 COMMERCIAL LN #5
JUPITER FL 33458

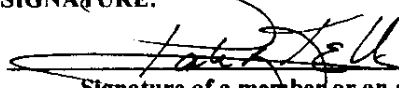
(Use attachment if necessary)

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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

PATRICK B. KELLY

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)

FILED
JUN 10 2008
JUN 10 2008