L14000056402

(Re	questor's Name)
(Add	dress)
(Add	dress)
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
,	

Office Use Only



800258641018

04/07/14--01002--020 **160.00

Effective Date 4/7/14

14 APR -7 PH 12: 55

14 APR -7 PM 12: 53

APR -7 2014 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Great food fast LLC	
SUBJECT: OFEOF FOOD FOST 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:	
Renat Khakimov Name of Person	
Name of Person	
Firm/Company	
1405 W 15+h St, unitC,	•
Address	
PANAMA CITY FL 32401 City/State and Zip Code	
City/State and Zip Code	_
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Vauhen Apanase villat (850) 341-31-65 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
1 \$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	ıs &
Mailing Address Street/Courier Address	

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

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

Effective Date 4/7/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	ı.	Na	me	31			
ant .				٠.		 \sim	

The name of the Limited Liability Company is:

(Must and with the words "I imited Liability Company "L. C." or "L. C."

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1405 W 15th Street	1405 W 15th Strat
unit "C". Panama City FL	Unit " Panama City FL
32401	32401

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:

Renay Khak; MOV

Name

1708 B, DRUMMOND AVE

Florida street address (P.O. Box NOT acceptable)

PANAMA CITY FL 32405

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.

Rogistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF SIATIONS
DIVISION OF COMPORATIONS

11. APR - 7 PM 12: 53

Title:	
	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	3.4 A
Amer Dmer	Youhen Apangsevia
	Youhen Apanasevice 3502 Jenus Ave, APT 1985 4
	D 27 T/ 22 - 5
	Panama City, FL, 32405

(Use attachment if necessary)	
	of filing: 4/7/2014 (OPTIONAL)
te of filing.)	cific and cannot be more than five business days prior to or 90 day
te of filing.)	cific and cannot be more than five business days prior to or 90 day
te of filing.)	eific and cannot be more than five business days prior to or 90 day
te of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	1272
te of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men	ber or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a ment (In accordance with section 605) constitutes an affirmation under	ber or an authorized representative of a member. 0209 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	(1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of a ment of the constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	ther or an authorized representative of a member. 10209 (f) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE: Signature of a ment of the constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	bet or an authorized representative of a member. 2009 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2