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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Premier Bartending School
601 Silks Run #2497
Hallandale Beach, FL 33009**

September 4, 2014

To whom it may concern:

Enclosed please find an application for the Articles of Organization for Premier Bartending School, LLC. Our address is:

601 Silks Run #2497
Hallandale Beach, FL 33009
954-589-2679

If you have any questions, please call the above phone number.

Kind Regards,

Tal Savion
Manager

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PREMIER BARTENDING SCHOOL, 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:

TAL SAVION
Name of Person

PREMIER BARTENDING SCHOOL, LLC
Firm/Company

601 SILKS RUN #2497
Address

HALLANDALE BEACH, FL 33009
City/State and Zip Code

cindyhbm@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TAL SAVION at (718) 288-5959
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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PREMIER BARTENDING SCHOOL, 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:

601 SILKS RUN #2497
HALLANDALE BEACH, FL 33009

Mailing Address:

601 SILKS RUN #2497
HALLANDALE BEACH, FL 33009

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:

LOUIS J. TERMINELLO
Name

2700 SW 37th AVE.
Florida street address (P.O. Box **NOT** acceptable)

MIAMI FL 33133
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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

TAL SAVION

1800 JACKSON ST. #301

HOLLYWOOD, FL 33020

MGR

GERARD DELANEY

601 SILKS RUN #2497

HALLANDALE BEACH, FL 33009

MGR

LOUIS J. TERMINELLO

2700 SW 37th AVE

MIAMI, FL 33133

MGR

BARRY KATES

9350 S. DIXIE HWY. PENTHOUSE ONE

MIAMI, FL 33156

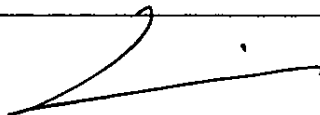
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 09/30/14 (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.)

TAL SAVION

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)

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TALLAHASSEE, FLORIDA

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