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COVER LETTER

TO:	Registratio Division of	n Section Corporations		
SUBJE	ECT:	TL.	J Restaurants, L.L.C.	
			imited Liability Company	
The en	closed Article	s of Organization and fee(s)	are submitted for filing.	
Please	return all corr	espondence concerning this r	matter to the following:	
		<u>J</u>	ason L. Harr, Esquire	
			Name of Person	
			The Harr Law Firm	
			Firm/Company	
		1326 Sou	uth Ridgewood Avenue, Suite	Twelve
			Address	
			ytona Beach, Florida 32114	
			City/State and Zip Code	
-		E-mail address: (to be us	onharr@harrlawfirm.com ed for future annual report notific	cation)
For furt	her information	on concerning this matter, pla	ease call:	
		n L. Harr, Esquire at (me of Person		66 elephone Number
Enclose	d is a check f	or the following amount:		
\$ 125.0) 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



October 8, 2014

JASON L HARR 1326 SOUTH RIDGEWOOD AVE STE 12 DAYTONA BEACH, FL 32114

SUBJECT: TLJ RESTAURANTS, LLC

Ref. Number: W14000061355

We have received your document for TLJ RESTAURANTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 814A00021507



Jason L. Harr Attorney at Law

Noah J. Prosser Attorney at Law

Daytona Beach, Florida 32114

Telephone: 386,226,4866 Telefax: 386.226.4886

Website: www.harrlawfirm.com

Nancy Centrone Paralegal to Mr. Harr

Annmarie Blair Paralegal to Mr. Prosser

October 9, 2014

Registration Section **Division of Corporations** Post Office Box 6327 Tallahassee, Florida 32314

Re:

TLJ Restaurants, L.L.C. Case Number: 508/004

FORWARDING FEI NUMBER

Dear Sir / Madame:

This office has the pleasure of representing TLJ Restaurants, LLC [W14000061355]. The purpose of this letter is to forward the FEI number for TLJ Restaurants, LLC. The FEI number is: 47-2042077.

If I can be of any further assistance please do not hesitate to contact my office.

Sincerely,

JASON L. HARR, P.A., by:

JASON L. HARR, J.D., M.P.A.

JLH:nc

cc: Mrs. Terrilynn Johnson

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I	[- N	ame:
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The name of the Limited Liability Company is:

TLJ Restaurants, 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:

Mailing Address:

1389 Surrey Park Drive Port Orange, FL 32128 1389 Surrey Park Drive Port Orange, FL 32128

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:

Jason L. Harr, Esquire
Name

1326 South Ridgewood Avenue, Suite 12

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

Port Orange FL 3211

Having been named as registered agent and to accept service of process for the above stated limited wablity 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)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR Manager	Terrilynn Johnson
	1389 Surrey Park Drive
	Port Orange, FL 32128
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	ASS TE TE
(Use attachment if necessary) LE V: Effective date, if other than the d Factive date is listed, the date must be	ate of filing: (OPTIONAL)
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LE V: Effective date, if other than the d fective date is listed, the date must be of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false in	member or an authorized representative of a member. 605.0203 (1) (b). Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than the d fective date is listed, the date must be of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false in	member or an authorized representative of a member. 605.0203 (1) (b). Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
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ARTICLE IV-

Page 2 of 2