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Special Instructions to	Filing Officer:	
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## COVER LETTER

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то:	Registration Section Division of Corporations		
SUBJI	ECT: <u>DJR Restaurants LLC</u> Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	natter to the following:	
	David J. Ragno	Name of Person	
	DJR Restaurants LLC	Firm/Company	
	PO Box 420435	Address	
	Summerland Key, Florida 33042	City/State and Zip Code	
ct	nefdaver@earthlink.net E-mail address: (to be use	d for future annual report notifica	tion)
For fur	ther information concerning this matter, ple	ase call:	
David	Ragno at (at (		ephone Number
	ed is a check for the following amount:  0 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 Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY PH 2: 13

ARTICLE I - Name:	SECTE CAPTER STATES
The name of the Limited Liability Company is:	drom dan et statea Haleabasse, flokua
DJR Restaurants LLC	
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
he mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
710 Spanish Main Drive #232	PO Box 420435
Cud Joe Key, Florida	Summerland Key, Florida
33042	33042
ARTICLE III - Registered Agent, Registered Office The Limited Liability Company cannot serve as its ow mother business entity with an active Florida registration. The name and the Florida street address of the registered	m Registered Agent. You must designate an individual or ion.)
David J. Ragno	
Nam	ne
701 Spanish Main Drive # 2	
Florida street address (P.O. Bo	ox <u>NOT</u> acceptable)
Cud Joe Key	FL 33042
City	Zip
Having been named as registered agent and to accept s	service of process for the above stated limited liability comp

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)

Page 1 of 2

<u>l'itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MBR	David J. Ragno
	PO Box 420435
	Summerland Key, Fl. 33042
	Outstand No. 1 1 1 000 12
<u> </u>	
<del></del>	
V: Effective date, if other than the dat	te of filing: January 15, 2015 (OPTIONAL)
CV: Effective date, if other than the date tive date is listed, the date must be so filing.)	te of filing: <u>January 15, 2015</u> . (OPTIONAL)  pecific and cannot be more than five business days prior to or 90
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