# 15000080750

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
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Office Use Only



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Effective Date 4/9/15

FAY 12 2015 MOTOM !!



#### **COVER LETTER**

SUBJECT: Michelle's Kitchen TO GO						
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:						
Michelle Russell Name of Person						
	Name of Person .					
Michelle's Kitchen To GO LLC.						
	Firm/Company					
2999 Bay Villas Ct.						
	Address					
Miramor Beach, FL. 32550						
Miramar Beach, FL. 32550  City/State and Zip Code  Michelle & Michelles Kitchen to go · com						
VIII	E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please call:					
Michelle Russellar 850 218-8339						
Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$125.00 Filing Fee	\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee.  Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	ed)				

# Mailing Address

TO:

Registration Section
Division of Corporations

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

# Street Address

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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2015

MICHELLE RUSSELL 2999 BAY VILLAS CT MIRAMAR BEACH, FL 32550

SUBJECT: MICHELLE'S KITCHEN L.L.LC.

Ref. Number: W15000026520

15 MAY 11 AN 10: CO

We have received your document for MICHELLE'S KITCHEN L.L.LC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L12000019970 (MICHELLE'S KITCHEN, LLC).

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 315A00007598

# Effective Date 4/9/15

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Michelle's Kitchen TO GO 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:
2999 Bay Villas ct. 2999 Bay Villas ct. Miramar Beach, FL. 32550 32550 32550
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:
Michelle Russell Name
7999 Bay Villas Ct. Florida street address (P.O. Box NOT acceptable)
Miramar Beach, FL. 32550 City State Zip
<del></del>

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

15 HAR 25 AH 8: 31
SECRETARY OF STATE

	Title: "AMBR" = Authorized Member		Name and Address:	
"MGR" = Manager  AMBQ			Michelle Russe 2999 Bay Villa Miramar Beach,	5 Ct.
		•		<del></del>
				<del></del>
	1	•		
	(Use attachment if nece	essary)		
(If an effect the date of Note: If the documents of the d	ective date is listed, the of filing.) If the date inserted in this	a date must be specific and block does not meet the a the Department of State's	April 9 2015 (OP) cannot be more than five business days applicable statutory filing requirements, the records.	prior to or 90 days after
	REQUIRED SIGNAT	Mulgeer	1 Russon	
	(In according to a constitution of a constitutio	ordance with section 605.0 ates an affirmation under the vare that any false information.	an authorized representative of a member 203 (1) (b), Florida Statutes, the execution the penalties of perjury that the facts stated the submitted in a document to the Departs provided for in s.817.155, F.S.)	n of this document herein are true.
	<u>,</u> -		or printed name of signee	
	ļ	••	Filing Fees:	
	\$ 30.00 Certified Co	or Articles of Organization	on and Designation of Registered Agent	SECRETA SECRETA
			Page 2 of 2	SSECTION OF ST
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**ARTICLE IV**The name and address of each person authorized to manage and control the Limited Liability Company: