

L15000084848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

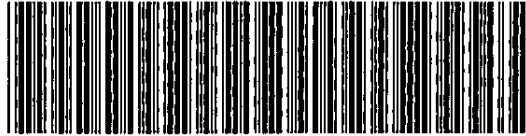
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100271723511

04/20/15--01021--009 **78.75

05/12/15--01044--001 **46.25

FILED
2015 MAY 12 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W15-29091

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEST FRESH COFFEE 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:

GIUSEPPE APA
Name of Person

BEST FRESH COFFEE LLC
Firm/Company

1437 N.W 10TH ST
Address

DANIA FLORIDA 33004
City/State and Zip Code

GIUSEPPEAPA61@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GIUSEPPE APA at (954) 205 2867
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 Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2015

GIUSEPPE APA
1437 NW 10TH ST
DANIA, FL 33004

SUBJECT: BEST FRESH COFFEE LLC
Ref. Number: W15000029091

RECEIVED
15 MAY 13 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BEST FRESH COFFEE LLC and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions 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) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 115A00008425

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BEST FRESH COFFEE 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:

1437 N.W 10TH ST.
DANIA BEACH FL. 33004

Mailing Address:

SAME

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:

GIUSEPPE APA

Name

1437 N.W 10TH ST.

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

DANIA FL. 33004

City

State

Zip

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2015 MAY 12 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

"AMGR"

GIUSEPPE APA
1437 N.W. 10TH ST.
DANIA FL 33004

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: MAY 1 2015 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.)

GIUSEPPE APA

Typed or printed name of signer

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 MAY 12 AM 10:45

FILED