

L15000086313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

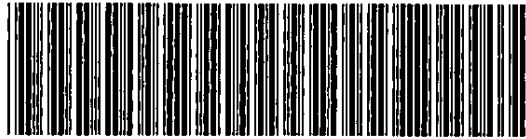
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/13/15--01011--013 **125.00

WIT-28669

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

15 MAY 15 PM 4:59

FILED

MAY 18 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: "Executive Chef Service Solutions, 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:

Vincenzo Esposito
Name of Person

E.C.S.S., LLC
Firm/Company

1009 63rd St west
Address

Bradenton, Florida 34209
City/State and Zip Code

ChefVinny713@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vincenzo (vinny) Esposito at (941) 773-9923
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

PAID 4-9-15
OK# 1002



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 23, 2015

VINCENZO ESPOSITO
1009 63RD ST WEST
BRADENTON, FL 34209

SUBJECT: EXECUTIVE CHEF SERVICE SOLUTIONS, LLC
Ref. Number: W15000028669

We have received your document for EXECUTIVE CHEF SERVICE SOLUTIONS, 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):

Please list the complete principal office address.

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: 315A00008276



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 15, 2015

VINCENZO ESPOSITO 2ND ML
1009 63RD ST WEST
BRADENTON, FL 34209

SUBJECT: EXECUTIVE CHEF SERVICE SOLUTIONS, LLC
Ref. Number: W15000028669

We have received your document for EXECUTIVE CHEF SERVICE SOLUTIONS, 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):

Please list the complete principal office address.

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: 315A00008276

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

"Executive Chef Service Solutions, 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:

1009 63rd st. west
Bradenton, Florida 34209

Po Box 14713
Braenton, Florida 34280

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:

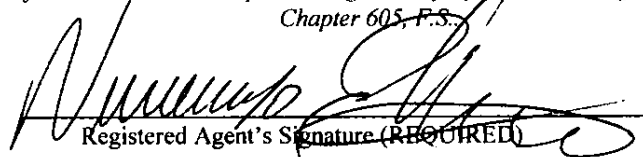
Vincenzo Esposito
Name

1009 63 rd St. west
Florida street address (P.O. Box **NOT** acceptable)

Bradenton FL 34209
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)

FILED
15 MAY 15 PM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

"AMBR"

Name and Address:

Vincenzo Esposito

1009 63rd St. west

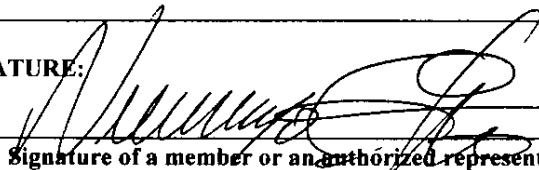
Bradenton, Fl. 34209

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Vincenzo Esposito

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)