

5/10/2016

Division of Corporations

L16000089035

Division of Corporations
 State Department
 Division of Corporations
 from the cover sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000115882 3)))



H160001158823ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
 Account Number : I20000000146
 Phone : (305)444-4994
 Fax Number : (305)444-4977

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

16 MAY 10 PM 3:03

 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
 FOOD 365 DELIVERY, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

16 MAY 10 AM 8:30

 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

MAY 11 2016

T. SCOTT

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

ARTICLE I

The name of the Limited Liability Company and Effective day is:

FOOD 365 DELIVERY, LLC

*(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation
"LLC," or "L.C.,")*

ARTICLE II

*The mailing address and street address of the principal office of the Limited Liability
Company is:*

Principal Office Address
6827 SW 37TH ST
MIAMI, FL 33155

Mailing Address
6827 SW 37TH ST
MIAMI, FL 33155

16 MAY 10 AM 8:30

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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:

R&P ACCOUNTING & TAXES, INC

Name

200 SE 1ST STREET, SUITE #604

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

MIAMI, FL 33131

FL City, State, and 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.

X

Registered Agent's Signature (REQUIRED)

ARTICLE IV

***MGR=Manager(s) or AMBR= AUTHORIZED Member(s): The name and address of each
Person authorized to manage and control the Limited Liability Company:***

Title:

***IVAN TUCKER
6827 SW 37TH ST
MIAMI, FL 33155***

MANAGER

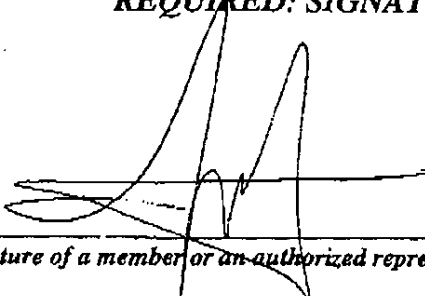
***DERRECK TUCKER
6827 SW 37TH ST
MIAMI, FL 33155***

MANAGER

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.***

REQUIRED: SIGNATURE

X 
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.)

IVAN TUCKER
Typed or printed name of signee