## L16000151401

(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



800288455608

08/02/16--01030--006 \*\*160.00



## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC	Chef's Specialty		
BODGEC	·	Limited Liabili	ty Company
The encl	osed Articles of Organization and fee(s)	are submitted	for filing.
Please re	turn all correspondence concerning this	matter to the f	ollowing:
	Dylan Edwards		
		Name of	Person
	Green Roads of Florida LLC		
		Firm/Co	mpany
	6891 Stirling Rd,		
		Addr	ess
	Davie, FL 33314		
	dylan@greenroadsworld.com	City/State an	d Zip Code
		sed for future a	nnual report notification)
For furthe	er information concerning this matter, ple	ease call:	
	Zachary Rose	904	861-5534
	Name of Person	Area Code	Daytime Telephone Number
Enclose	d is a check for the following amount:		
	Filing Fee \$130.00 Filing Fee & Certificate of Status	└─Certifi	so Filing Fee & S160.00 Filing Fee, ed Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

14

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:			
Chef's Specialty LLC			<del></del>
(Must end with the words "Limited Liability	y Company, "L.L.C.	," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the principal	he Limited Liability	Company is:	
Principal Office Address:		Mailing Address:	Ser Ti
1100 sw 101 ave	16931 sw 109		
Miami, Fl 33174	Miami, FL 3.	3157	
The name and the Florida street address of the registered agent a  Arby Barrel Name  6891 St. Liv Florida street address (P.O.  Davie Florida street address (P.O.  City S  Having been named as registered agent and to accept service of preplace designated in this certificate, I hereby accept the appointment further agree to comply with the provisions of all statutes relating to am familiar with and accept the obligations of my position as registered.	A Road  Box NOT acceptable  OT do.  tate  cocess for the above so it as registered agent to the proper and cor	33314 Zip stated limited liability comp and agree to act in this can suplete performance of my	pacity. I duties and t
(D)			
Registered Ag	gent's Signature (RE	QUIRED)	
	NTINUED) Page 1 of 2	1 70	SUZETTE L. BARCLAY CONGRISSION & FF 988748 EXPIRES: March 2, 2020 Thru Notary Public Underwritere
·		NOTARY P	u BIC

ARTICLE IV-

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR of Production	Zachary Rose
	1100 sw 101 ave
	Miami, Fl 33174
MCP of Commissions	Eric Hamm
MGR of Operations	16931 sw 109 ave
	Miami, Fl 33157
MGR of Sales	Dylan Edwards
	6891 Stirling Rd
	Davie, FL 33314
ective date is listed, the date must b of filing.)	date of filing: August 1st (OPTIONAL)  e specific and cannot be more than five business days prior to or 90 d
EV: Effective date, if other than the fective date is listed, the date must be of filing.)	e specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not b
EV: Effective date, if other than the lective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 de not meet the applicable statutory filing requirements, this date will not be nent of State's records.
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Departm. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 denot meet the applicable statutory filing requirements, this date will not be ment of State's records.
EV: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Departm. EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of	e specific and cannot be more than five business days prior to or 90 denot meet the applicable statutory filing requirements, this date will not be ment of State's records.
EV: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Departm. EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is ex	not meet the applicable statutory filing requirements, this date will not be ment of State's records.  In member or an authorized representative of a member.  Recuted in accordance with section 605.0203 (1) (b), Florida Statutes.
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Departm. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is exit am aware that any	a member or an authorized representative of a member.  secuted in accordance with section 605.0203 (1) (b), Florida States information submitted in a document to the Department of States are felony as provided for in a 817.155. F.S.
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Departm. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is exit am aware that any	a member or an authorized representative of a member.  secuted in accordance with section 605.0203 (1) (b), Florida States information submitted in a document to the Department of States are felony as provided for in a 817.155. F.S.
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Departm. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is exit am aware that any	a member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Departm. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is exit am aware that any	a member or an authorized representative of a member.  a member or an authorized representative of a member.  a member of state with section 605.0203 (1) (b), Florida Statutes.  false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Departm. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is exit am aware that any	a member or an authorized representative of a member. tecuted in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
EV: Effective date, if other than the lective date is listed, the date must be of filing.)  If the date inserted in this block does ment's effective date on the Department. EVI: Other provisions, if any.  REQUIRED SIGNATURE.  Signature of This document is exil am aware that any constitutes a third document.	a member or an authorized representative of a member.  a member or an authorized representative of a member.  a member of state with section 605.0203 (1) (b), Florida Statutes.  false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.

Page 2 of 2

