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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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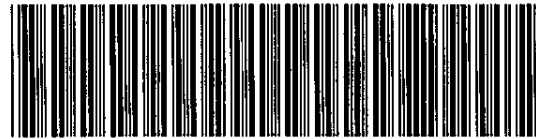
(Business Entity Name)

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M. MOON
DEC 12 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOLDEN BEANS FOOD MART, 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:

CARLITO G FLORES

Name of Person

C.G. FLORES ACCOUNTING & TAX

Firm/Company

809 BEVERLY PARKWAY

Address

PENSACOLA, FL 32505

City/State and Zip Code

FACTNG @AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLITO G FLORES

850

435-6845

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

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\$130.00 Filing Fee &
Certificate of Status

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\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

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\$160.00 Filing Fee,
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

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DEC 11 2012
TALLAHASSEE, FL
CLERK OF SUPERIOR COURT

ARTICLES OF ORGANIZATION
OF
GOLDEN BEANS FOOD MART, LLC

ARTICLE I. - Name

The name of the Limited Liability Company is:

GOLDEN BEANS FOOD MART, LLC

Article II - Address:

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

3350 W NAVY BOULEVARD
PENSACOLA, FLORIDA 32505

ARTICLE III - Registered Agent Name and Address is:

CHU YIN CHIANG
3350 W. NAVY BOULEVARD
PENSACOLA, FLORIDA 32505

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.


Chu Yin Chiang

ARTICLE IV -

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

Title

Name and Address:

MGR- Manager/Director

Chu Yin Chiang
3350 W NAVY BOULEVARD
PENSACOLA, FLORIDA 32505

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TALLAHASSEE
FLORIDA

page 2 of 2

ARTICLE V. Effective date: Date of filing.

ARTICLE VI. Other provisions:

To lawfully engage or transact in business permitted by law and Florida Statutes.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitute a third degree felony as provided for in s 817.155, F.S.

Chu Yin Chiang date 12/7/16
Chu Yin Chiang, MGR/DIRECTOR

16 DEC 12 AM 10:37

SEC. OF STATE
TALLAHASSEE, FLORIDA