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.

(((H170003196253)))



H170003196253ABC1

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 : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

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

Email Address: contact@interstatefilings.com

# FLORIDA LIMITED LIABILITY CO. HERITAGE HOSPITALITY AND TRADING SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

C RICO DEC 0 6 2017

Electronic Filing Menu

Corporate Filing Menu

Help

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE I - Name:

The name of the Limited Liability Company is:

# HERITAGE HOSPITALITY AND TRADING SERVICES 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:

 2071 FLATBUSH AVE STE 166
 2

 BROOKLYN, NY 11234
 E

2071 FLATBUSH AVE STE 166 BROOKLYN, NY 11234

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:

INTERSTATE AGENT SERVICES LLC

Name

1540 GLENWAY DRIVE

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

TALLAHASSEE FL 32301
City State 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 occept 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)

Page 1 of 2

<u>Fitter</u> "AMBR" = Authorized N	Name and Address:	
"MGE" = Manager	311/51	
MGRM	GERASIMOS I SELENTIS	
	207) FLATBUSH AVE STE 166	
	BROOKLYN, NY 11234	
	<del></del>	
	· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necess  CLE V: Effective date, if oth		
CLE V: Effective date, if oth effective date is listed, the date of filing.) If the date inserted in this b	than the date of filing:  than the date of filing:  e must be specific and cannot be more than five business days prior to or 90 dr  ck does not meet the applicable statutory filing requirements, this date will not be Department of State's records	-
CLE V: Effective date, if oth effective date is listed, the date of filing.)  If the date inserted in this b	than the date of filing:	-
CLE V: Effective date, if oth effective date is listed, the date of filing.) If the date inserted in this becamen's effective date on the	than the date of filing:	-
CLE V: Effective date, if oth effective date is listed, the dite of filing.) If the date inverted in this becamen's effective date on the	than the date of filing:	-
CLE V: Effective date, if oth effective date is listed, the dite of filing.) If the date inserted in this becamen's effective date on the	than the date of filing:  e must be specific and cunnot be more than five business days prior to or 90 drock does not meet the applicable statutory filing requirements, this date will not be Department of State's records	-
CLE V: Effective date, if other effective date is listed, the date of filing.)  If the date inserted in this becomen 's effective date on the CLE VI: Other provisions, if  REQUIRED SIGNATU  Signature  This does I am awar	than the date of filing:  e must be specific and cunnot be more than five business days prior to or 90 drock does not meet the applicable statutory filing requirements, this date will not be Department of State's records	-
CLE V: Effective date, if oth effective date is listed, the dite of filing.) If the date inserted in this becument's effective date on the CLE VI: Other provisions, if  REQUIRED SIGNATU  Signature  This document aware constitute	than the date of filing:  e must be specific and cannot be more than five business days prior to or 90 deals does not meet the applicable statutory filing requirements, this date will not be Department of State's records  by:  E:    COPTIONAL	-

Page 2 of 2