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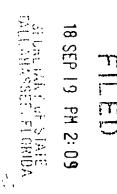
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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SEP 22 2018 T SCHROFDEP

COVERLETTER

TO: New Filing Section Division of Corporations	
SUBJECT: INLET CATE, LLC	nited Liability Company
Name of En	inica clabinty Company
The enclosed Articles of Organization and fee(s) ar	e submitted for filing.
Please return all correspondence concerning this nu	atter to the following:
Leslie C Mingus Tuld Cafe, LLC	
·	Name of Person
INLA CATE, LLC	
	Firm/Company
638 North Walter La	
	Address
INITBEACH, F1 324	+61
INIT Beach, F1 324 Comingus Ogmail Com	nyrstate and Zip Code
E-mail address; (to be used	for future annual report notification)
For further information concerning this matter, please	call;
Leslie (Mingus al	334) 301 - 3574
	rea Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:					
Inlet Cafe, L (Must conta	in the words "Limited	Liability Com	pany, "L.L.C.," or "LLC.")		_	
ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Li	united Liability Company is:			
<u>Principa</u>	1 Office Address:		<u>Mailing Addr</u>	ess:		
638 Abeth Walden	Lakeshope De		638 North Wylden Lake	corse DZ		
Inlet Beach, Fl	32461		Inlet Beach, FT 324	·	_	
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an ac The name and the Florida street a	cannot serve as its own crive Florida registration ddress of the registered Leslie Min 638 Noeth WAL Florida street address	n Registered Apon.) d agent are: VQV 5 Name Lakes is (P.O. Box N	gent. You must designate an inc	dividuation in the control of the co	18 SEP 19 PH 2: 05	•
	Inlet Beach	FI	32461		Ca)	
	City	State	Zip	. ,		
Having been named as registered as place designated in this certificate, had further agree to comply with the proam familiar with and accept the obli	hereby accept the app visions of all statutes r igations of my position	cointment as regelating to the past registered a	gistered agent and agree to act i proper and complete performanc	in this capacit e of my duties	y. I	

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Membe	r
"MGR" = Manager	01.5
MGZ	Charlies Donut, LLC
	638 North Walden Lakethore De
	<u> Iulet Beach, H 32461</u>
Ambe	Kahue & Czeam LLC
Ambe	5311 East County Huy 300, Unit 5
	5011 CAST COUNTY THAT SOOL ON 17 5
	<u> </u>
·	
(Use attachment if necessary)	21
•	10 L COTTON TO 00
ARTICLE V: Effective date, if other than	the date of filing:
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mu	the date of filing: (OPTIONAL)
ARTICLE V: Effective date, if other than (If an effective date is listed, the date muther date of filing.)	ist be specific and cannot be more than five business days prior to or days after
ARTICLE V: Effective date, if other thar (If an effective date is listed, the date muther date of filing.) Note: If the date inserted in this block d	ist be specific and cannot be more than five business days prior to or days after possible statutory filing requirements, this date will not be listed as
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ARTICLE V: Effective date, if other than (If an effective date is listed, the date muthe date of filing.) Note: If the date inserted in this block d the document's effective date on the Department of the Depar	cof a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
ARTICLE V: Effective date, if other than (If an effective date is listed, the date muthe date of filing.) Note: If the date inserted in this block d the document's effective date on the Department of the date on the Department of the department of the department of the document of the document of the document of the document of the department of the date of	ast be specific and cannot be more than five business days prior to or days after ones not meet the applicable statutory filing requirements, this date will not be listed at artment of State's records.
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)