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PICK-UP WAIT MAIL
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Tallahusee Hot Pot and BBQ 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:
Chengen Lin
Name of Person
1872 Thomasville Rd
Tallahassee, F2 32303
Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chengen Lin at (917) 774 1339 Name of Person Area Code Daytime Telephone Number
Epclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \] \$130.00 Filing Fee & \text{Certified Copy} \\ (additional copy is enclosed) \$160.00 Filing Fee. \text{Certificate of Status & Certified Copy} \\ (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	

ARTICLE II - Address:

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

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:

1872 Thomasville Rel Florida street address (P.O. Box NOT acceptable)

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.

Registered Agent/s Signature (REQUIRED)

(CONTÍNUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	Chengen Lin 1872 Thomasville Ru Tallaliassee, FL 32303 Ruchens Zhans	
 -	Till che gee, FZ 32303	
(Use attachment if necessary)		
(If an effective date is listed, the date must be sp the date of filing.)	e of filing:	
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	1	
This document is exect I am aware that any fals	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.	
, ,	hael Jany Typed or printed name of signer	

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)