sion of C Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

Wake "N" Bake Cafe LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

	Registration Section Division of Corporations		
SUBJECT	Wake "N" Bake Cafe LLC		
SOBJEC		Limited Liabili	ty Company
The enclo	sed Articles of Organization and fee(s	s) are submitted	for filing.
Please reti	um all correspondence concerning thi	s matter to the f	ollowing:
	Cheyenne Moseley, Legalzoom.co	m, Inc.	
		Name of	Person
	Legalzoom.com, Inc.		
		Firm/Cor	mpany
	101 N. Brand Blvd., 10th Floor		
		Addre	ess
	Glendale, CA 91203		
	onlinefilings@l.egalzoom.com	City/State and	1 Zip Code
	E-mail address: (to be a	ised for future a	nnual report notification)
For further i	information concerning this matter, pl	case call:	
	Cheyenne Moseley	323	962-8600 ext. 7625
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for the following amount:		
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	Certifie	O Filing Fee & S160 00 Filing Fee, cd Copy
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	1	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Wake "N" Bake Cafe LLC	
(Must end with the words "Limited Liabit	ity Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address: The mailing address and street address of the principal office of	the Cimited Liability Company is:
Principal Office Address:	Malling Address:
6536 Grosvenot Ln	
Orlando, FL 32835	
ARTICLE III - Registered Agent, Registered Office, & Regi (The Limited Liability Company cannot serve as its own Registe	istered Agent's Signature: cred Agent. You must designate an individual or
another business entity with an active Florida registration.)	
another business entity with an active Florida registration.) The name and the Florida street address of the registered agent r	we:

Name

3343 Sussaquin Ct

Florida street address (P.O. Box <u>NOT</u> acceptable)

Orlando Florida 32818
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. Thereby accept the appointment as registered agent and agree to act in this carpacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and t am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Mony Dolled
Augistered Agent's Signature (REQUIRED)

(CONTINUED)
Page LaC

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Title:		Name and Address:	
	- Authorized Member	·	
"MGR" = } MGR	Manager	Danie Barrie Ca	
14(1)/4		Rony Boyer Sr 6536 Grosvenor Ln	
		Orlando, FL 32835	
MGR		Vethia Valtaira	
111111		Kathia Voltaire 6536 Grosvenor Lu	
		Orlando, FL 32835	
		O140404 1 0 3 2033	
AMBR		Rony Boyer Sr	
		6536 Grosvenor Ln	
		Orlando, F1, 32835	
AMBR		Rony Boyer Jr	
		6536 Grosvenor Lp	
		Orlando, FL 32835	
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Attachment to

Articles of Organization for Wake "N" Bake Cafe LLC

Additional members of the Limited Liability Company are:

Name of Member	<u>Address</u>
Kuron Boyer	6536 Grosvenor Ln, Orlando, FL 32835
Kathia Voltaire	6536 Grosvenor Ln, Orlando, FL 32835
Sulette Renelion	6536 Grosvenor Ln, Orlando, FL 32835
Tiara Faublas	6536 Grosvenor Ln, Orlando, FL 32835