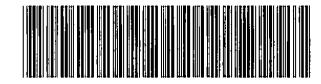
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COVER LETTER

TO:	New Filing Section Division of Corporations		
CHR II	THE BUTCHER'S GRILL, LLC		
(10,00)	Name of Limited Liability Company		
The en	enclosed Articles of Organization and fee(s) are submi	tted for Hing.	
Please	e return all correspondence concerning this matter to t	he following:	
	GAETANO GAZZARA		
	Name	e of Person	
		/Company	
	2872 N. US HIGHWAY 1		
	A	ddress	
	FORT PIERCE, FL 34946		
	City/State gqm95mg@yahoo.com	and Zip Code	
	E-mail address: (to be used for future	re annual report notification)	
For furthe	her information concerning this matter, picase call:		
	MARIA GAZZARA 772		
		Daytime Telephone Number	
Enclose	sed is a check for the following amount:		
] \$ 125.00	Certificate of Status Cert	5.00 Filing Fee & S160.00 Filing Fce. Gertificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address	Street Address	
New Filing Section Division of Corporations		New Filing Section Division of Corporations	
	P.O. Box 6327 Tallahassec, FL 32314	Clifton Building 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:	
Switter Entoring Company 15.	
THE BUTCHER'S GRILL, LLC	
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
he mailing address and street address of the principal office	coffice that control are
	of the Limited Liability Company is:
Principal Office Address:	
Tringpar Other Address:	Mailing Address:
2872 N. US Hwy 1	
Fort Pierce, FL 34946	1 2872 N. US Hwy_1
FOR FIELD, FL 34940	Fort Pierce, FL 34946

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:

GAETANO GAZZARA		
	Name	
2655 12TH STREET		
Florida street addre	ss (P.O. Box <u>NOT</u> a	cceptable)
VERO BEACH	- FL	32960
City	State	Zin

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)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" – Manager	GAETANO GAZZARA
	2872 N. US HIGHWAY 1
	FORT PIERCE, FL 34946
	PORT PIERCE, Pt. 34946
AMBR	MICHAEL GAZZARA
	2872 N. US HIGHWAY 1
	FORT PIERCE, FL 34946
	PORT PIERCE, PL 34946
MGR	MARIA GAZZARA
<u> </u>	2872 N. US HIGHWAY 1
	FORT PIERCE, FL 34946
	FORT FIERCE, PL 34946
(Use attachment if necessary)	
(vise diddinient if necessary)	
ARTICLE V. Effective date, if other than the dua	of filing: <u>lune 20, 2019</u> . (OPTIONAL)
(If an effective date is listed, the date must be an	OF HONAL)
the date of filing.)	ecific and cannot be more than five business days prior to or 90 days after
	ad Path on a car
the document's effective date on the Department	neet the applicable statutory filing requirements, this date will not be listed a
the document's effective date on the Department	of State's records,
ARTICLE VI: Other provisions, if any,	
REOUIRED SIGNATURE:	
Coeff	vo Com
Signature of a me	ember of an authorized representative of a member.
This document is execu	ted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any fale	information submitted in a document to the Document of the Document

I am aware that any false information submitted in a document to the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.

GAETANO GAZZARA, Authorized Member Typed or printed name of signee

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)