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417 É. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CONNELL'S BURGERS, LLC

				-
		Art of Inc. File		
		LTD Partnership File		
		Foreign Corp. File	_	
	✓	L.C. File		
		Fictitious Name File		
		Trade/Service Mark		
		Merger File		
		Art. of Amend, File		
		RA Resignation		
		Dissolution / Withdrawal	<u>.</u>	
		Annual Report / Reinstatement		
		Cert. Copy		
	✓	Рною Сору		
		Certificate of Good Standing	20 432 	
		Certificate of Status	يند. الار: 20	
		Certificate of Fictitious Name	1	
		Corp Record Search	``.	
		Officer Search	<u></u>	
		Fictitious Search		
		Fictitious Owner Search	·	
		Vehicle Search		
		Driving Record	-	
		UCC 1 or 3 File	-	
		UCC 11 Search	-	
me		UCC Retrieval		
		Courier		

Signature	
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Requested by: SN	03/05/20	
Name	Date	Time
Walk-In	Will Pick Up	<u> </u>
172 Ponder's Printing - Thom sive CLA B/00		

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

2020 MAR -5 AH 10: 01

SECRETAL OF STATE

Council's Burgers, LLC (Must constin 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:

536 12th Street West	PO Box 9
Bradenton, FL 34205	Bradenton, FL 34206

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:

Blalock Walters, P.A. Name

802 11th Street West Florida street address (P.O. Box NOT acceptable)

34205 FL. Bradenton Zip State City

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 the position as registered agent as provided for in Chapter 605, F.S.

Registered Agent'/ Signature (REQUIRED)

(CONTINUED)

•		norized to manage and control the Limited Liability Company;		
	<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
	MGR	Lise Burgess PO Box 9 Brødenton, FL 34206		
			5	
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	(Use attachment if necessary)		2	
	 (If an effective date is listed, the date must be spec the date of filing.) 	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after cet the applicable statutory filing requirements, this date will not be listed as		
	ARTICLE VI: Other provisions, if any.			
	Signature of a mer This document is execute I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.		
		Lisa Burgess, Manager		
		Typed or printed name of signed		

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