L2000071863

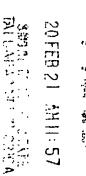
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700340942387

92/21/20--01022--021 **150.00



COVER LETTER

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT: TATTY'S COMFORT FOODS 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:	
Keilah M. Malavet Name of Person	<u>.</u>
Traile of Ferson	
TATTY'S COMFORT FOODS LLC	
Firm/Company	
2119 Agate Street	
Address	
City/State and Zip Code lovemefirst79@gmail.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Keilah M. Malavet at (321) 443-9221 Name of Person Area Code Daytime Telephone N	
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certified Copy Certified Copy is enclosed) Certified Copy is enclosed)	0.00 Filing Fee, ificate of Status & ified Copy onal copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

Division of Corporations 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:	= :
	57
TATTY'S COMFORT FOODS LLC	변문 기
	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the princi	par office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2119 Agate Street	2119 Agate Street
KISSIMMEE, FL 34744	KISSIMMEE, FL 34744
another business entity with an active Florida regis. The name and the Florida street address of the regis.	
Keilah M, Malavet	
	Name
2119 Agate Street	
Florida street address (P.O	. Box NOT acceptable)
KISSIMMEE	FL 34744
City	Zip
Haring born and the market and a section of the	and a second control of the second control o
<u> </u>	ept service of process for the above stated limited liability company at accept the appointment as registered agent and agree to act in this
*	sions of all statutes relating to the proper and complete performance

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)

Page 1 of 2

Fitle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Keilah M. Malavet
	2119 Agate Street
	KISSIMMEE, FL 34744
	
	of filing: (OPTIONAL)
V: Effective date, if other than the date of the date is listed, the date must be spe	of filing:
ctive date is listed, the date must be speffling.) VI: Other provisions, if any.	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of tive date is listed, the date must be sperfiling.) VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of tive date is listed, the date must be speffling.) VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of tive date is listed, the date must be speffling.) VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90
CV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	cific and cannot be more than five business days prior to or 90

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)

TATTY'S COMFORT FOODS LLC 2119 Agate Street KISSIMMEE, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of TATTY'S COMFORT FOODS LLC:

Keilah M. Malavet 2119 Agate Street KISSIMMEE, FL 34744

Keilah M. Malavet, Organizer

Date