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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-J? WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	
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CORPORATE ACCESS, ____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

		* '			
	PICK 1	UP:	4/28 Glinda	_	
\					
X:	x FILING	LLC			
1.	Birdie's Hot Chicken, LLC (CORPORATE NAME AND DOCUME	ENT #)			
2.	(CORPORATE NAME AND DOCUME	NT #)			
3.	(CORPORATE NAME AND DOCUME	NT #)			 -
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	(CORPORATE NAME AND DOCUME	NT #)			
SPECI INSTR	AL RUCTIONS:				
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COVER LETTER

	New Filing Se Division of Co					
SURIFC	Birdie's H	ot Chicken, LLC				
SUINIC	••	Na	me of Lin	nited Liabi	ity Company	
The encio	sed Articles o	f Organization and	fec(s) are	e submitted	l for filing.	
Please reti	um all corresp	ondence concernir	ng this ma	itter to the	following:	
	Emilia R. A	kridge				
				Name of	Person	
	Crown Holo	lings Group, LLC				
				Firm/Co	трапу	
	4828 Ashfor	rd Dunwoody Roa	d, Suite 4	00		
				Addi	ress	
	Atlanta, GA	30338				
	eakridge@cro	ownhgroup.com	C	ity/State ar	d Zip Code	
	<u></u> _	E-mail address: (to	be used	for future	nnual report notificati	ion)
For further i	information co	ncerning this matt	er, please	call:		
	Emilia R. Ak	ridge	77 at (391-1233	
	Nam	ne of Person			Daytime Telephon	e Number
Enclosed i	s a check for t	he following amou	ınt:			
■\$ 125.00) Filing Fee	□\$130.00 Filin Certificate of S		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio	ng Address iling Section on of Corporations ox 6327	;		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree	issee

Tallahassee, FL 32314

Tallahassee, FL 32303

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ARTICLESOF ORGANIZATION FOR FLO	RIDALIMITED LIABILITY COMPANY (AFT. 28 PH 1: 04
ARTICLE 1 - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TAILLINGSEE, FL
Birdie's Hot Chicken, LLC	
(Must contain the words "Limited Liab	ility 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:
4828 Ashford Dunwoody Road	4828 Ashford Duwnwoody Road
Suite 400	Suite 400
Atlanta, GA 30338	Atlanta, GA 30338

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:

Business Filings Inc	orporated	_
	Name	
1200 South Pine Isla	ind Road	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Plantation	FL	33324
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 capacity. T 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.,

(CONTINUED)

as

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Crown Holdings Group, LLC
	4828 Ashford Dunwoody Road, Suite 400 Atlanta, GA_30338
<u>AR</u>	Emilia R. Akridge 4828 Ashford Dunwoody Road. Suite 400 Atlanta. GA 30338
(Use attachment if necessary)	
ICLE V: Effective date, if other than the dat	te of filing:
ICLE V: Effective date, if other than the dat effective date is listed, the date must be sate of filing.)	pecific and cannot be more than five business days prior to or 90 days at
ICLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) If the date inserted in this block does not	pecific and cannot be more than five business days prior to or 90 days at meet the applicable statutory filing requirements, this date will not be liste
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ICLE V: Effective date, if other than the date effective date is listed, the date must be spate of filing.) If the date inserted in this block does not ocument's effective date on the Departmen ICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or 90 days as meet the applicable statutory filing requirements, this date will not be listed to f State's records.
ICLE V: Effective date, if other than the date effective date is listed, the date must be sparte of filing.) If the date inserted in this block does not occurrent's effective date on the Department of the Depa	pecific and cannot be more than five business days prior to or 90 days a meet the applicable statutory filing requirements, this date will not be listent of State's records.

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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Emilia R. Akridge