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| PICK-UP WAIT MAIL |
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| | ew Filing Sec ivision of Cor | | | | |
|--|---------------------------------|----------------------------|--|---|----------|
| SUBJECT | BRIGHTE | YES CATERING, LLC | ; | | |
| SOMECT | • | Name of | Limited Liabil | ity Company | |
| The enclos | ed Articles of | Organization and fee(s | are submitted | for filing. | |
| Please retu | rn alt correspo | ondence concerning this | matter to the f | ollowing: | |
| | Britney Mill | er | | | |
| | | | Name of | Person | |
| | BRIGHTEY | ES CATERING, LLC | | | |
| | | | Firm/Co | mpany | |
| | 1253 Saddle | back Ridge Road | | | |
| | | | Addr | ess | |
| | Apopka, FL | 32703 | | | |
| | ehatulaeecaal | ingwithbritney@gmail | City/State an | d Zip Code | |
| - | | E-mail address: (to be u | | nnual report notificati | ion) |
| For further is | nformation co | ncerning this matter, pl | ease call: | | |
| | | 615 | 512-7112 | | |
| | Nam | e of Person | | Daytime Telephon | e Number |
| Enclosed is | a check for t | he following amount: | | | |
| □\$125.00 Filing Fee □\$130.00 Filing Fee Certificate of Status Mailing Address | | Certifi | 5.00 Filing Fee & ed Copy al copy is enclosed) | ■\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) | |
| | | | Street Address | inicion | |
| New Filing Section Division of Corporations | | | | New Filing Section D The Centre of Tallaha | assee |
| | | ox 6327 assee, FL 32314 | | 2415 N. Monroe Stre Tallahassee, FL 3230 | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | | |
|------------------------|---|------------------------|--|
| The name of the Limite | d Liability Company is: | | |
| | | | |
| BRIGHTEY | 'ES CATERING, LLC | | |
| () | dust contain the words "Limited | LLiability Compa | ny. "L.L.C" or "Ll.C.") |
| ARTICLE II - Addres | ss: | | |
| The mailing address an | d street address of the principal | office of the Limi | ted Liability Company is: |
| | Principal Office Address: | | Mailing Address: |
| 1253 Saddle | eback Ridge Road | | 253 Saddleback Ridge Road |
| Apopka, FL | . 32703 | | Apopka, FL 32703 |
| The Limited Liability | tered Agent, Registered Office Company cannot serve as its ow with an active Florida registrati | n Registered Age | gent's Signature: nt. You must designate an individual or |
| The name and the Flori | da street address of the registere | ed agent are: | |
| | Angela Lee | | |
| | | Name | |
| | 124 N. Ułysses Dri | ve | |
| | Florida street addre | ss (P.O. Box <u>NO</u> | I acceptable) |
| | Apopka | FL | 32703 |

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.

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

ARTICLE IV-

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

| <u> </u> | Name and Address: | |
|--|--|---------------------------------|
| "AMBR" = Authorized Member "MGR" = Manager | | |
| · · | | |
| MGR | Britney Miller 1253 Saddleback Ridge Road | |
| | Apopka, FL 32703 | |
| | Арорка, 11. 32703 | |
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