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### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

\*850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# incserv<sup>o</sup>

#### ORDER FORM

FROM

**TO** Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

Melissa Moreau mmoreau@incserv	.com	2821	and the same
850.656.7953	AND SEED OF	AUG 10 PH 2	

REQ	UEST	DATE	8/10/2021

**PRIORITY** Regular Approval

#### ORDER ENTITY\_\_\_

JUST SALAD 1180 OKEECHOBEE LLC

### PLEASE PERFORM THE FOLLOWING SERVICES: JUST SALAD 1180 OKEECHOBEE LLC (FL)

Please file the attached articles and provide a certified copy.

#### NOTES: \$155.00 Authorized Email address for annual report reminders: lisa@delaneycorporate.com

## RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, August 10, 2021 Page 1 of 1

ARTICLES OF ORGANIZATION FOR FLORIE	DA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
the state of the s	ty Company, "L.L.C.," or "LLC.")
Just Salad 1180 Okeechobee LLC	
(Must contain the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	20 20
The mailing address and street address of the principal office of	ty Company, "L.L.C.," or "LLC.")  of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
c/o Just Salad L.L.C	c/o Just Salad LLC
663 Lexington Avenue	663 Lexington Avenue
New York, NY 10022	New York, NY 10022
The name and the Florida street address of the registered agent a   NRAI Services, Inc.  Name  1200 South Pine Island Road  Florida street address (P.O.	e ud
Plantation F	FL 33324
City S	State Zip
Having been named as registered agent and to accept service of proplets designated in this certificate. I hereby accept the appointmen further agree to comply with the provisions of all statutes relating to am familiar with and accept the obligations of my position as regis Registered Ag	nt as registered agent and agree to act in this capacity. I to the proper and complete performance of my duties, and I speed agent as provided for in Chapter 605, F.S

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
<u>Member</u>	Just Salad LLC 663 Lexington Avenue New York, NY 10022
E V: Effective date, if other than the cective date is listed, the date must be of filling.)	date of filing: (OPTIONAL)  specific and cannot be more than five business days prior to or 90 c
E V: Effective date, if other than the cective date is listed, the date must be of filing.)  the date inserted in this block does a ment's effective date on the Departm	e specific and cannot be more than five business days prior to or 90 of or meet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the cective date is listed, the date must be of filing.) the date inserted in this block does a ment's effective date on the Departm  E VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 of or meet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the dective date is listed, the date must be of filing.) the date inserted in this block does a ment's effective date on the Departm  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a This document is exall am aware that any filest the date in the date of the date	e specific and cannot be more than five business days prior to or 90 of or meet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the decive date is listed, the date must be of filing.) The date inserted in this block does a ment's effective date on the Departm  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a This document is ex I am aware that any if constitutes a third de	expecific and cannot be more than five business days prior to or 90 continuous meet the applicable statutory filing requirements, this date will not least of State's records.  In member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, lates information submitted in a document to the Department of State
ective date is listed, the date must be of filing.)  'the date inserted in this block does a ment's effective date on the Departm E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a This document is excluded a may are that any find constitutes a third definition.	expecific and cannot be more than five business days prior to or 90 content the applicable statutory filing requirements, this date will not be ent of State's records.  In member or an authorized representative of a member.  Secured in accordance with section 605.0203 (1) (b), Florida Statutes. Take information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.  C. Sole Member by: Nick Kenner, CEO  Typed or printed name of signee  Filing Fees:  Organization and Designation of Registered Agent