

**C22000456608**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.  
Account Number : I20070000019  
Phone : (518)689-1212  
Fax Number : (518)432-0742

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
BOJANGLES LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 03       |
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2022 OCT 24 PM 2:06

FILED  
22 OCT 24 PM 12:35  
TALLAHASSEE, FLORIDA

***Articles of Organization***  
*for*  
***Florida Limited Liability Company***

ARTICLE I NAME

The name of the Limited Liability Company is: **BOJANGLES LLC**

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: **17210 SE 84TH KNIGHT AVENUE, THE VILLAGES, FL 32162**

Mailing Address: **17210 SE 84TH KNIGHT AVENUE, THE VILLAGES, FL 32162**

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

**GLENN MATTSON, 17210 SE 84TH KNIGHT AVENUE, THE VILLAGES, FL 32162**

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

/s/ GLENN MATTSON

\_\_\_\_\_  
Registered Agent's Signature

(CONTINUED)

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THE NINTH JUDICIAL CIRCUIT  
IN FLORIDA  
TALLAHASSEE, FLORIDA

ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER

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

**GLENN MATTSON, Authorized Member, 17210 SE 84TH KNIGHT AVENUE,  
THE VILLAGES, FL 32162**

**HEATHER MATTSON, Authorized Member, 17210 SE 84TH KNIGHT  
AVENUE, THE VILLAGES, FL 32162**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in s.817.155, F.S.

/s/ GLENN MATTSON

\_\_\_\_\_  
Authorized Member

/s/ HEATHER MATTSON

\_\_\_\_\_  
Authorized Member

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