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Division of Corporations : (850)617-6381

Account Name : YOUR DREAM SERVICES CORP.

Account Number : 120200000137 Phone : (786)660-0108 Fax Number : (786)364-1047

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

info@yourdreamms.com Email Address:\_

## FLORIDA LIMITED LIABILITY CO.

Prime Restaurant Supply LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130,00

Electronic Filing Menu

Corporate Filing Menu

Help

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			(((H240001898863))) -
	COA	VER LETTER	
TO: New Filing So Division of Co			
Prime Re SUBJECT:	staurant Supply LLC		
	Name of Lim	nited Liability Corpusy	<del></del>
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
Melissa Ma	arlene Jordan Herrera		
		Name of Perch	
	Malissa Mark	ane Jordan Hennen Firmy Ompany	<u>a.                                    </u>
		Firmy Company	
13941 Sw	122nd Ave		
		Adtress	<del></del>
Miami, Fło	rida 33186		
		ty/State and Zip Coole	
infoanshares	tsupply@gmail.com		
	E-mail address: (to be used	for future annual report notification	n)
For further information c	oncerning this matter, please	call:	
Melissa Jor	dan 78		
Psk	no of Person Ar	rea Code Daytime Telephone	Number
Enclosed is a check for	the following amount:		
□\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is end (sec))
	ingAddress	Street Address New Filing Section Div	icion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

141101112001	CHICLE IDSTITUTE OF COLUMN	1127100517271111271	AMBITATI COMUMANT		
407104 F 1 A				(((FI2400018	198863)))
ARTICLE I - Name:					
The name of the Limited Liabilit	ty Company is:				
Prime Restaurant Su	pply LLC				
(Must cont	ain the words "Limited	Liability Company, "	L.L.C.," or "LLC.")		
ABTIOLEU					
ARTICLE II - Address: The mailing address and street ad	ddeara at this malaninal i	Man afaha Limitan H	inhility Campaning		
The manning address and street at	udiess of the principar o	omice of the Laimteu t	Jaonity Company is:		
Princip	al Office Address:		Mailing Address:		
	·				
12023 Sw 117 Court			Sw 117 Court		
Miami, Florida 3318	<u> </u>	Mian	i, Florida 33186		
	<del></del>	<del></del>	<del></del>		
ARTICLE III - Registered Age	ent Registered Office	& Registered Agent	's Signutura:		
(The Limited Liability Company				al or	
another business entity with an a			oa most designate air (narvid)		2
	<u> </u>	,		7	<b>=</b>
The name and the Florida street	address of the registere	d agent are:		ÄLI ABAS	PO ANH YOU
	_	_			<b>≺</b>
	Melissa Marlene Jor			O) (	3 1
		Nima		IT .	-
	13941 Sw 122nd Av				<u> </u>
		ss (P.O. Box NOT acc	vantable)	- <u>(</u> - )	ي <u>ن</u> 9
	riorida succi addres	(1.0. 00x <u>MOT</u> acc	eptable)	<u> </u>	O
	Miami	Florida	33186	VQLEST 1.3.	9
	Cly	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 his 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 Opper 605, ISS

Mslissa Marlens Jordan Herrera Registered Agent's Senature (REQUIRED)

(CONTINUED)

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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Melissa Marlene Jordan Herrera
	13941 Sw 122nd Ave Miami, Florida 33186
	Miami, Florida 53180
ffective date is listed, the date mu	the date of filing:
LEV: Effective date, if other than frective date is listed, the date must of filing.) If the date inserted in this block doument's effective date on the Dept. LEVI: Other provisions, if any.	st be specific and cannot be more than five business days prior to or 90 day ses not meet the applicable statutory filing requirements, this date will not be
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