

L24000 426 823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

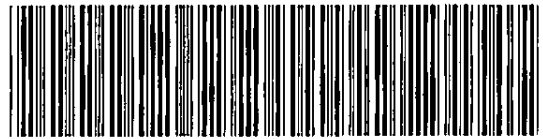
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2011 11 11 11:00 AM

SEC. FILED
11/11/11
11:00 AM

MS

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Big Daddy's Brunch LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alex mountis / Amanda Perry
Name of Person

Big Daddy's Brunch
Firm/Company

8081 Timberstone ct Apt 335
Address

Delray Beach FL 33446
City/State and Zip Code

amanda@bigdaddysbrunch.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alex mountis at 717 , 682 5445
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|--|

Mailing Address

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

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RECEIVED
JAN 11 2007
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Big Daddy's Bunch, LLC

(Must contain the words "Limited Liability 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:

411 Federal Hwy
Boynton Beach
FL 33435

Mailing Address:

8081 Tumblestone Ct
Apt 335 Delray Beach
FL 33446

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.)

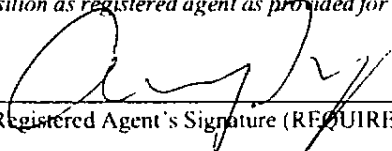
The name and the Florida street address of the registered agent are:

Alex Mountis / Amanda Perry
Name

8081 Tumblestone Ct Apt 335
Florida street address (P.O. Box **NOT** acceptable)

Delray Beach FL 33446
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, 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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

Alex Mourtis - AMBR/
MGR

8081 Tumblestone Ct
Apt 335
Delray Beach FL 33446

Amanda Perry - AMBR/
MGR

8081 Tumblestone Ct
Apt 335
Delray Beach FL 33446

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
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.

Amanda Perry
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)
- \$ 5.00 Certificate of Status (Optional)

FILED
RECEIVED
JAN 14 2014
CLERK OF THE
DEPARTMENT OF
STATE
TALLAHASSEE, FL

**TO: New Filing Section
Division of Corporations**

SECRET
NOV 1960

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(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

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411 Federal Hwy
Dayton Beach
FL 33435

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Apt 335 Delray Beach
FL 33446

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Name

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Delray Beach FL 33446
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[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SEC. 605, F.S.
JAN 11 2011
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

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MGR

8081 Tumblestone Ct
Apt 335
Delray Beach FL 33446

Amanda Perry - AMBR/
MGR

8081 Tumblestone Ct
Apt 335
Delray Beach FL 33446

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\$ 5.00 Certificate of Status (Optional)

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JAN 11 2011
CLERK OF THE
DEPARTMENT OF
STATE
TALLAHASSEE, FLORIDA