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Division of Corporations

Fax Number : (850) 922-4003

Prom:

Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL, P.A.

Account Number : 076077000521 Phone : (954)761-2910 Fax Number : (954)764-4996

LIMITED LIABILITY COMPANY

RECEIVED 9 SEP 24 PM 1: 33 SECKLYSTE, PLORIDA

Island Restaurant Ventures, LLC

 Certificate of Status
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 Estimated Charge
 \$337.50

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ARTICLES OF ORGANIZATION OF ISLAND RESTAURANT VENTURES, LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. NAME. The name of the Limited Liability Company is ISLAND RESTAURANT VENTURES, LLC (the "Company").
- 2. PERIOD OF DURATION. The period of duration of the Company shall be
- 3. <u>PURPOSE</u>. The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.
- 4. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The street address of the principal office of the Company is: 5555 College Road, Key West, Florida 33040.
- 5. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Douglas J. Bell, 5555 College Road, Key West, Florida 33040.
- 6. <u>ADDITIONAL MEMBERS</u>. Members may admit additional members upon the majority vote of the then existing members.
- 7. CONTINUITY; NO RIGHT TO DISTRIBUTION ON WITHDRAWAL: The remaining Members of the limited liability company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in this limited liability company. No Member shall be entitled to receive a return of capital or other distribution upon withdrawal from this limited liability company or otherwise, except as otherwise provided in the Regulations of this limited liability company.

Prepared by:

Thomas O. Katz, Esq., FL Bar #355836

Ruden, McClosky, et al, P.O. Box 1900

Ft. Lauderdale, Florida 33301 Phone: 954-764-6660 Fax: 954-764-4996

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8. <u>MANAGEMENT</u>. The business of the limited liability company shall be managed by one or more Managers. The names and addressed of the initial Manager, who will serve until the first annual meeting of members or until his successor(s) is elected and qualified, is as follows:

<u>Name</u>

Address

Ralph Sanchez

c/o 5555 College Road Key West, Florida 33040

The undersigned has executed these Articles of Organization on the 21st day of September, 1999.

By: Dougles I

(An authorized representative of the

Members of the Company)

Prepared by:

Thomas O. Katz, Esq., FL Bar #355836

Ruden, McClosky, et al, P.O. Box 1900

Ft. Lauderdale, Florida 33301

Phone: 954-764-6660 Fax: 954-764-4996

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned authorized representative of ISLAND RESTAURANT VENTURES, LLC

- The above named limited liability company has at least one member.
- 2. The total amount of cash contributed by the members is \$1,000.00
- No property other than cash is being contributed by the members.
- 4. The total amount of anticipated additional contributions by the members WIII be an amount up to \$750,000.00.

By: Book Book Book

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Preparedesys

Thomas O. Katz, Esq., FL Bar # 355836 Ruden, McClosky, et al, P.O. Box 1900 Ft Lauderdale, FL 33301 Phone: 954-764-6660 Fax: 954-764-4996

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CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: ISLAND RESTAURANT VENTURES, LLC.
- The name and address of the registered agent and office is:

Douglas J. Bell 5555 College Road Key West, Florida 33040

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 its 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.

Douglas J. Bell (

Registered Agent

Date)

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