

MO6000002458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

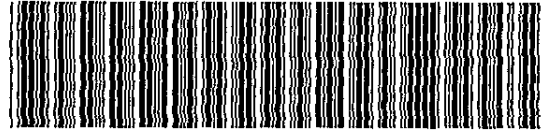
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800068181428

04/18/06--01007--010 **82.50

03/23/06- 01074--011 **87.50

FILED
APR 18 2006
1:00 PM
1:06-2458
OK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2006

THOMAS BARRY JR.
1630 S.E. GREEN ACRES CIRCLE, APT 103
PORT ST. LUCIE, FL 34952

SUBJECT: T.B. SERVICES, L.L.C.
Ref. Number: W06000014807

We have received your document for T.B. SERVICES, L.L.C. and your check(s) totaling \$170.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 806A00026357

APR 18 2006
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

APR 18 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2006

THOMAS BARRY JR.
1630 S.E. GREEN ACRES CIRCLE, APT 103
PORT ST. LUCIE, FL 34952

SUBJECT: T.B. SERVICES, L.L.C.
Ref. Number: W06000014807

We have received your document for T.B. SERVICES, L.L.C. and check(s) totaling \$87.50 of which \$87.50 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$37.50 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 306A00020958

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: T.B. SERVICES, L.L.C.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

THOMAS J. BARRY JR.
(Name of Person)

T.B. SERVICES, L.L.C. / BARRY'S DELECATESSEN
(Firm/Company)

1630 S.E. GREEN ACRES CIRCLE APT H103
(Address)

PORT SAINT LUCIE FLORIDA 34952
(City/State and Zip code)

For further information concerning this matter, please call:

THOMAS J. BARRY JR at (772) 342-3550
(Name of Person) (Area Code & Daytime Telephone Number)

RECEIVED
MAY - 1
MAY 12 1953

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T.B. SERVICES, L.L.C.
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

THOMAS J. BARRY JR
(Name of Person)

T.B. SERVICES, L.L.C.
(Firm/Company)

1630 SE GREEN ACRES CURLE APT H103
(Address)

PORT SAINT LUCIE FL 34952
(City/State and Zip Code)

RECEIVED
JUN 17 1993
PM 12:53

For further information concerning this matter, please call:

THOMAS J. BARRY JR at (772) 342-3550
(Name of Person) (Area Code & Daytime Telephone Number)

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

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. T.B. SERVICES, L.L.C. (Name of Foreign Limited Liability Company)

2. NEW JERSEY (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)

4. APRIL 6TH 2005 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 1630 S.E. GREEN ACRES CIRCLE APT H103 PORT SAINT LUCIE, FLORIDA 34952 (Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here []

9. The name and usual business addresses of the managing members or managers are as follows: THOMAS J. BARRY JR. 1630 S.E. GREEN ACRES CIRCLE APT H103 PORT ST. LUCIE, FL 34952

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: OPERATE A

DELIATESSEN & RELATED SERVICES INCLUDING BUT NOT LIMITED TO CATERING FOOD.

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

THOMAS J. BARRY JR. Typed or printed name of signee

FILED 2005 MAY -1 PM 12:53

2070

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

T.B. SERVICES, L.L.C

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

Patricia Wells
(Name)

2610 NW HAYCHES HARBOR RD 4206
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Port Saint Lucie FL 34983
City/State/Zip

FILED
JAN 11 PM 12:53
TALLAHASSEE
FLORIDA

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 608, Florida Statutes.

Patricia Wells
(Signature)

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

T.B. SERVICES, L.L.C.
0600232837

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on April 6, 2005.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*William J. McDonnell, Esq.
110 North Broadway
South Amboy, NJ 08879*

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

T.B. SERVICES, L.L.C.



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
6th day of March, 2006*

Bradley Abelow

*Bradley I. Abelow
Acting State Treasurer*