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(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:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)
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FILED SECRETARY OF SIAIL DIVISION OF CORPORATION:

DB

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 401 BARCELONA LLC				
	Limited Liability Company)			
The enclosed Articles of Organization and fee(s) a	are submitted for filing.			
Please return all correspondence concerning this r	natter to the following:			
IODOE DEL AEZ				
JORGE PELAEZ (Name of Person)				
(Name of Person)				
401 BARCELONA LLC				
(Firm/Company)				
4620 AVENIDA MARINA				
(Address)				
PENSACOLA FL 32504				
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·			
For further information concerning this matter, please call:				
JORGE PELAEZ	at (850 ) 857 1388			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
401 BARCELONA LLC  ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office A	ddress:	Mailing Address:			
401 BARCELONA ST		4620 AVENIDA MARINA	4620 AVENIDA MARINA		
PENSACOLA FL 32	501	PENSACOLA FL 32504			
		tered Office, & Registered Agent's Signa	ture: 2006 MAR	SECRE 1	
		Vame .	င်	FAY CAY	
	4620 AVENIDA MA	RINA	3	OF SIGN ORPORATE	
Florida street address (P.O. Box I		ss (P.O. Box <u>NOT</u> acceptable)	ڣ		
	PENSACOLA	FL 32504	30	H. Di	

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, F.S..

City, State, and Zip

(CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manage	
"MGRM" = Mana	ging Member
MGRM	JORGE PELAEZ
	4620 AVENIDA MARINA
	PENSACOLA FL 32504
MGRM	PAULA GHESSI
	4620 AVENIDA MARINA
	PENSACOLA FL 32504
(Use attachment it	necessary)
(Ose attachment in	noodigary
NOTE: An addi	onal article must be added if an effective date is requested.
	VA TWIND
REQUIRED SIG	NATURE:
	Lour Te Do a
	Signature of a member or an authorized representative of a member.
	(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
	JORGE PELAEZ
	Typed or printed name of signee
	Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)