## L04000005174

(Re	questor's Name)			
(Ád	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP		MAIL		
(Bu	siness Entity Nar	me)		
(Do	ocument Number)			
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				
1/13	FL	10		
		Acquisition		



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Office Use Only

## TRANSMITTAL LETTER

10:	Division of Corporations	
SUBJE	CT: Mario T Valentuela - LLC (Name of Limited Liability Company)	
	losed Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	Mario T Valenzuela	
	(Name of Person)	
	Mario T Valenzuela - LLC	
	(Firm/Company)	
	2307 W Viginia Are (Address)	
	Tampa, FL 33607 (City/State and Zip Code)	
	(City/State and Zip Code)	
For furtl	her information concerning this matter, please call:	
	Mario 1/0/enzuela 183 389-1822	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

(Name of Person)

MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	;
Mario T Valenzuela	HC
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2307 W Virginia the	2307 W Virginia Au
Tampa, FL 33607	Tampa, Fl 33607
	**************************************
ADTICLE III Designand Agent Designance	d Office R. Benintowed Ament's Signature.
The name and the Florida street address of the	
Mario T Vai	registered agent are:
Name	
	minia He
·	O. Box NOT acceptable)
Tanza	
Tanpa,	FLORIDA 83607

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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member  MGR	Anna Valenzuela 2307 II Virginia Ave	<u> </u>
· · · · · · · · · · · · · · · · · · ·	Tampa, FL 33607	
		v
		. – .
· · · · · · · · · · · · · · · · · · ·		
(Use attachment if necessary)		
NOTE: An additional article must be	e added if an effective date is requested.	
REQUIRED SEGNATURE:	dengula	
-	authorized representative of a member.	
(In accordance with section 608 of this document constitutes and that the facts stated herein are	3.408(3), Florida Statutes, the execution affirmation under the penalties of perjury (ue.)	
Hn M. Val	inted 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)