- LO3000003901

(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:
į

Office Use Only

TALLAHASSEE, FLORIDA



900011185139

01/31/03--01049--003 **160.00

" * 1 ·

CURRAN & ASSOCIATES, P.A.

ATTORNEYS AT LAW
THE COLONNADE - SUITE 303
2333 PONCE DE LEON BOULEVARD
CORAL GABLES, FLORIDA 33134-5427

03 JAN 31 AM 10: 30 SECRETART OF STATE TALLAHASSEE, FLORIDA

FILED

LAURENCE E. CURRAN

Telephone: (305) 529-9596 Facsimile: (305) 675-0548 Email: lecurran@att.net

January 30, 2003

Via FEDEX
Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Registration of Tinto Cafe, LLC

Dear Sir or Madam:

Please find enclosed the Articles of Registration for a Florida Limited Liability Company and a check in the amount of \$160.00 covering the fees for filing, designation of registered agent, certified copy and certificate of status. Also enclosed is a SASE.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Laurence E. Curran

` ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Tinto Cafe, LLC

FILED

03 JAN 31 AM 10: 30

ARTICLE II - Address:

CONCIART OF STATE The mailing address and street address of the principal office of the Limited Liability Company is: ORIDA Tinto Cafe, LLC, 881 Ocean Drive - TH5, Key Biscayne, FL 33149

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

	Name
2333 Ponce de Leon E	Boulevard - Suite 303
Florida street addre	ss (P.O. Box NOT acceptable)
Coral Gables	FI 33134

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.

Registered Agent's Signature

(An additional article must/be added if an effective date is requested)

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.)

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)