L04000031852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

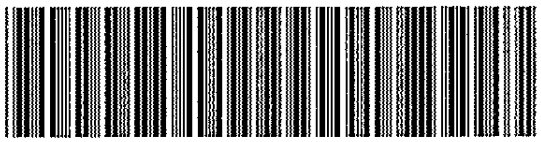
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600036911896

05/19/04--01012--013 **155.00

04 MAY 19 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 MAY 19 AM 10:53
DIVISION OF CORPORATIONS
FLORIDA

5-19-04

CORPORATE ACCESS, INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 5/19 [illegible]

✓ CERTIFIED COPY _____ CUS _____

PHOTO COPY _____ ✓ FILING LLC

1.) Spanish Restaurant, LLC
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

FILED
04 MAY 19 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS _____

ARTICLES OF ORGANIZATION
OF
SPANISH RESTAURANT, LLC,
A LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I
Name

The name of the Limited Liability Company is Spanish Restaurant, LLC.

ARTICLE II
Company Address

The mailing address and street address of the principal office of the Limited Liability Company is 941 Tuskawilla Trail, Winter Springs, Florida 32708.

ARTICLE III
Registered Agent, Registered Office and Signature of Registered Agent

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

M. A. Garcia III
601 N. New York Avenue, Suite 201
Winter Park, Florida 32789

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, and I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties. I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent

04 MAY 19 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
ARTICLES
AND
FILED

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 18th day of May, 2004, which shall be effective upon filing with the Florida Secretary of State.

(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.)

M. A. Garcia III, Authorized Agent

ACCEPTED
AND
FILED
04 MAY 19 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA