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_	
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	PICK-UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified	d Copies Certificates of Status
Specia	al Instructions to Filing Officer:
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ZODS JAN 20 P 3 14
SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Registration Se Division of Con						
SUBJECT: MOTA Pizza, LLC (Name of Limited Liability Company)						
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.				
Please return all correspondent	ondence concerning this matte	er to the following:				
Tony Des	Santis	Name of Person)				
	(0	Name of Person)				
		Firm/Company)				
	·	This company,				
860 NW 86t	h Avenue, Apartment 613	(Address)				
Plantation, FL 33324 (City/State and Zip Code)						
For further information of	concerning this matter, please	call:				
Joanne Capuano		at (561) 366-9144				
(Name	of Person)	(Area Code & Daytime Te	Number)			
Enclosed is a check fo	r the following amount:		5 JAN CREI			
Ø \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Cupy (additional topy is enclosed)			
Registi Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines Street	MAILING AI Registration S Division of Co P.O. Box 6327	ection proporations			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
MOTA Pizza, LLC	
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Malling Address.
Thicipal Office Address:	Mailing Address:
860 NW 86th Avenue	860 NW 86th Avenue
Apt. 613	Apt. 613
Plantation, FL 33324	Plantation, FL 33324
ADMICT EVIL D. L. LA . D. L.	0.55
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	egistered agent are:
	Sistered agent are.
Tony DeSantis	
Name	
860 NW 86th Avenue, Apartme	nt 613
Florida street addı	ress (P.O. Box <u>NOT</u> acceptable)
Plantation	FL 33324
City, State, ar	
Having been named as registered agent and to a	ccept service of process for the approximated limited
registered agent and agree to act in this canacity	is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all
	formance of my duties, and I am familiar with and
	ered agent as provided for in Chapter 608, F.S.,
Im A	£ 65 3 5
Registered Agent's	Simplific
/ Registered Agent s	Signature Diff

(CONTINUED)

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Title	Name and Address:
<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Tony DeSantis
	860 NW 86th Avenue, Apt. 613
	Plantation, FL 33324
	
	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Jony (Lato an authorized representative of a member.
,	•
(In accordance with section of this document constitutes	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury
that the facts stated herein	

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

Tony DeSantis

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

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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

Typed or printed name of signee