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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:

Office Use Only

SECHETARY OF STATE TALL 4HASSEE, FLORIDA



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03/13/06--01008--061 **125.00

SNOTES TO THE STATE OF THE STAT

COVER LETTER TO: Registration Section Division of Corporations (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: (City/State and Zip Code) For further information concerning this matter, please call: Enclosed is a check for the following amount:

Mailing Address

Certificate of Status

\$125.00 Filing Fee \$\infty\$ \$130.00 Filing Fee &

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

\$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

\$160.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

06 MAR 13 AM 9: 19

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY, COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Los Chalatecos Carpet and file 11C
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address: .

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

PO Box 7/7 Enema

PO Box 7/7 Enema

FA 3 23 3 2

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Florida street address (P.O. Box NOT acceptable

Fixtura L FL 37332

City, State, and Zip

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 (REQUIRED)

(CONTINUED) Page 1 of 2

Title: "MGR" = Manager	Name and Address:	SECRETARY OF TALL AHASSEF.
"MGRM" = Managing Member $\mathcal{H} \mathcal{H} \mathcal{H} \mathcal{H}$	Ehren In	maric Errotua
MERM	Jose Cortag	Vena 1 1. Hu 90 EF (32524)
MERM	Edgan Eiv 1874 Jon Ercenbero	era Aper
(Use attachment if necessary)		
LE V: Effective date, if other than the fective date is listed, the date must		

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:

REQUIRED SIGNATURE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)