Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

f (850)205-0383

From:

Account Name : PARCORP SERVICES, LTD.

Account Number : 119990000011 Phone : (800)603 2533 Fax Number : (800)398 0461

FLORIDA/FOREIGN LIMITED LIABILITY CO.

DELICIOSO LLC

Certificate of Status	
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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OF APR 18 PM 12: 53

OF APR 18 CORPORATION

J. BRYAN APK 1 9 2006

(((H060001030413)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DELICIOSO LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1255 GATEWOOD AVE SPRING HILL, FL 34608 1255 GATEWOOD AVE SPRING HILL, FL 34608

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

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

MARIA ELENA DIAZ

Name

1255 GATEWOOD AVE

Florida street address (P.O. Hox NOT acceptable)

SPRING HILL, FL 34608

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..

(CONTINUED)

(((H06000103041 3)))

Page 1 of 2

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

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

Title:	Name and Address:	8
"MGR" = Manager "MGRM" - Managing Member		SOR BRIT
MGRM	MARIA ELENA DIAZ	0 9
	1255 GATEWOOD SPRING HILL, FL 34608	H 0: 2
MGRM	JANETH PATROCINIO	12/
	1472 ESCOBAR AVE SPRING HILL, FL 34608	
MGRM	JORGE PULEX	· · · · · · · · · · · · · · · · · · ·
	6540 DATE PALM BLVD #15	
	PORT RICHEY, FL 34668	Proces 24 1 2 2
	The second secon	

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE

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.)

DAVID L. SURINA, ORGANIZER

Typed or printed name of signce

Filing Fees:

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

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

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Page 2 of 2