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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATEMS DIVISION OF CORPORATIONS

J. BRYAN SEP 2.5 2006

COVER LETTER

TO: Registration Sec Division of Corp				.
_{SUBJECT:} Tita's M	urals,LLC			
	(Name of Limited	d Liability Company)		
The enclosed Articles of	Organization and fee(s) are st	ubmitted for filing.		
Please return all correspo	ondence concerning this matte	r to the following:		
Margarita	Quintero			
	(I	Name of Person)		
Tita's Mu	rals,LLC			SECRETARY OF STATE OF SIGN OF SEP 22 PH 2: 1
	(Firm/Company)		P 2
1899 SI	neffield Ave.			2 P
	<u></u>	(Address)		2 087
Marco Is	sland, Fl., 34145			: 13
		(State and Zip Code)		·
For further information of	oncerning this matter, please	call:		
Thomas Patas		at (239 825-755)	ñ	
	of Person)	(Area Code & Daytime Te		
Enclosed is a check for	the following amount:		-	: _ _
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filin Certificate of Sta Certified Copy (additional copy is e	atus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Addres Registration Section Division of Corporation Clifton Building	_	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ANIZATION FOR	R FLORIDA LIMITED LIABIL	ITY COMPANY
		NYSION OF 22 P
ed Liability Compar	nv is:	P. 95
	.,	S SET
		P RPC
_	<u></u>	
nited Liability Company, '	"Limited Company" or their abbreviation "LLC,	," or "L.C.,")
		<i>ω τ</i>
ss:		
nd street address of t	the principal office of the Limited Li	ability Company is:
ress:	Mailing Address:	
	4000 Shaffald Ava	
<u>}</u>	Marco Island, Florida 34 145	
		
ny cannot serve as its own Florida registration.)	n Registered Agent. You must designate an indiv	idual or another SFFECTIVE DATE 09/20/06
	Name	4 '
75 Sundrop Ct.		
	eet address (P.O. Box <u>NOT</u> acceptable)	-
	eet address (P.O. Box <u>NOT</u> acceptable) FI. 43145	-
Florida streamco Island,		- · · · · · · · · · · · · · · · · · · ·
	ed Liability Company, nited Liability Company, ss: d street address of the street addr	Mailing Address: Mailing Address: 1899 Sheffield Ave. Marco Island, Florida 34145 tered Agent, Registered Office, & Registered Agent's any cannot serve as its own Registered Agent. You must designate an indiv Florida registration.) Ida street address of the registered agent are:

(CONTINUED)
Page 1 of 2

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

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

MGR	Margarita Quintero
	1899 Sheffield Ave. Marco Island, Fl. 34145
	Warco Island, Fl. 34145
	96
-	
	2
·	
(Use attachment if necessary)	
LE V: Effective date, if other than	the date of filing: Sept. 20, 2006
	st be specific and cannot be more than five business day
days after the date of filing.)	

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.)

Margarita Quintero

Typed or printed name of signee

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)