(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



500096255625

04/11/07--01010--008 **55.00

COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: Tropi	cal Hand Car Wash &	& Detail, LLC		
	(Name	of Limited Liability Co	ompany)	
Dear Sir or Madam:				
The enclosed Article	es of Correction and fee(s) a	re submitted for filing.		
Please return all corr	respondence concerning this	s matter to the followin	ıg:	
Jorge Cueto				
	(Name of Person)		_	
Tropical Hand Ca	ar Wash & Detail, LLC		_	07 APR 11 AHII: 06 SECRETARY OF STATE ALLAHASSEE FLORID
	(Firm/Company)			PR I
1990 SW 27th Av	/enue			
****	(Address)		_	
Miami, FL. 3314	5			
	(City/State and Zip Code)		_	Sm on
For further informati	on concerning this matter,	olease call:		
Jorge Cueto		at (305		
(Na	nme of Person)	(Area Code &	& Daytime Telephone Number)	
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:			
□ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST Tropical	The name of the limited liability company is: Hand Car Wash & Detail, LLC	
<u>SECO</u>	ND: The articles of organization or the application to transact business	
<u>(CF</u>	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST.	<u>ATEMENT</u>
V	Contains an incorrect statement. The incorrect statement, the reason the state incorrect, and the corrected statement are as follows: Incorrect Statement: Nelson Cabral is listed as a Manager in Article IV of the Articles of Organ	
	Reason: Nelson Cabral was erroneously listed as a Manager. He is not a member of said	t business and
	he has no interest is said business.	
	Correct Statement: Only two (2) Managers should be listed in Article IV: Jorge Cueto and	Jose M. Cueto
	<u>OR</u>	
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	signed and
		O7/A
		APR APR
Dated:	March 28	AHII:
	Signature of a member or authorized representative of a member Jorge Cueto	OF OF THE PROPERTY OF THE PROP
	Typed or printed name of signee	
	Filing Fee: \$25.00	

Certified Copy:

\$30.00 (optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	,
ARTICLE 1 - Name:	7
The name of the Limited Liability Company is:	う
Tropical Hand Car Wash & Detail, LLC	
(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:	
1990 SW 27th Avenue	
Miami, FL. 33145	
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.)	T i
The name and the Florida street address of the registered agent are:	
David Rodriguez,	أبتث
Name Name	i ii Pirang
1990 SW 27th Avenue	المصيد
Florida street address (P.O. Box NOT acceptable)	
Miami _{FL} 33145	
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

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

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

<u>Title:</u>	Name and Address:		
"MGR" = Manage "MGRM" = Mana			
Manager	Jorge Cueto		
· · · · · · · · · · · · · · · · · · ·	1990 SW 27th Avenue		
	Miami, FL. 33145		
Manager	Jose M. Cueto		
	2641 SW 149 Place		
	Miami, Fl. 33185		
Manager	Nelson Cabral		
	2642 SW 149 Place		
	Miami, Fl. 33185		
			
(Use attachment is	f necessary)		
TEV. Effective d	ota if other than the data of filing:	OPTIONAL)	
	ate, if other than the date of filing: (ed, the date must be specific and cannot be more than five bu	•	\r
0 days after the dat		siliess days pric	,,
o days after the dat	e or ming.	,	
	4		
REQUIRED SIG	NATURE:	O7 APR SECRETALLAH	a.wm
;	Signature of a member or an authorized representative of a member.	TARY ASS	1,74
-	(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.)	AMI EF FLI	
	Jorge Cueto	I: O: TATE ORID	े सम्बद्ध
	Typed or printed name of signee	> ' O1	

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)