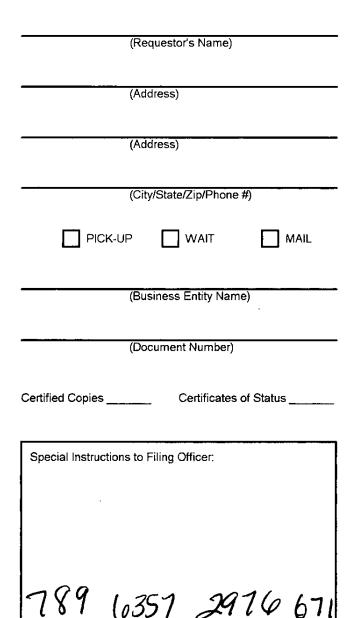
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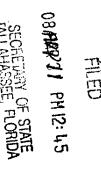
Office Use Only

W08-15670



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03/25/08--01043--008 **160.00



M. Thomas APR 1 1 2008

COVER LETTER

Registration Section

TO:

Division of Corpor	rations					
SUBJECT: BL&L. L		y Compar				
	(Name of Limite	u Liability Compa	11y <i>)</i>			
The enclosed Articles of Org	ganization and fee(s) are s	ubmitted for filing	-			
Please return all corresponde	ence concerning this matte	er to the following:	:			
Lisamarie A	Aponte					0
	(Name of Person)			<u></u> 至) A P
BL&L. Limi	ted Liability C	ompany			FE.	PR 1
.		(Firm/Company)		•	SS N	
7330 SW 6	2 Place suit	e 220			E GF S	08 APR 11 PH 12: 45
		(Address)				5. +5
South Mian	ni 33 [.]	143			> '''	
- · · · · · · · · · · · · · · · · · · ·	(City	/State and Zip Code)			
For further information conc	erning this matter, please	call:				
Lisamarie Apor	nte	at (305	665-650	01		
(Name of Po	erson)	(Area Code	& Daytime Tele	phone Number)		
Enclosed is a check for the	e following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Certified Cop (additional copy	у	\$160.00 Filing Certificate of S Certified Copy (additional copy is	tatus &	
R D P	Iailing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Registration Olivision Olifton Bo	urier Address on Section of Corporations uilding cutive Center C	ircle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 26, 2008

LISAMARIE APONTE 7330 SW 62 PLACE STE 220 SOUTH MIAMI, FL 33143

SUBJECT: BL&L LIMITED LIABILITY COMPANY

Ref. Number: W08000015670

We have received your document for BL&L LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P06000083505.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II FILED

OB APR 11 PH 12: 45
SECRETARY OF STATE
SECRETARY OF STATE

Letter Number: 508A00018015

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

business entity with an active Florida registration.)

Barredo, Lopez & Lopez Limited Liability Company

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:	08 AP
7330 SW 62 Place suite 220	子台 7330 SW 62 Place 実句	70
suite 220	suite 220	
South Miami 33143	South Miami, FL 33243-2250	PX
ARTICLE III - Registered Agent, F (The Limited Liability Company cannot serve as i	Registered Office, & Registered Agent's Signature is own Registered Agent. You must designate an individual or another	<u> </u>

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

Victor Barredo
Name

7330 SW 62 Place suite 220

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

South Miami _{FL} 33143

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 Agnature (REQUIRED)

(CONTINUED)
Page 1 of 2

•						
ARTICLE	IV- I	Manager(s	s) or	Managing	Membe	r(s):

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

"MGRM" = Managing Meml	
MGR	Victor Barredo 7330 SW 62 Place suite 220
	South Miami, FL 33143
	COUNT MINIMIN, 1 C CO 140
MGRM	Ray Lopez
	7330 SW 62 Place suite 220
	South Miami, FL 33143
MGRM	Javier Lopez
	7330 SW 62 Place suite 220
	South Miami, FL 33143
Use attachment if necessary	
,	
LE V: Effective date, if other	than the date of filing: (OPTION
	must be specific and cannot be more than five business da
days after the date of filing.)	
	<i>a</i>

Signature of a member of 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.)

VICTOR BALREDO

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)