## L08000081324

(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:	1
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,	

Office Use Only



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Effective Date 08 21 08

08/25/08--01011--015 \*\*160.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN

AUG 2 6 2008

**EXAMINER** 

## **COVER LETTER**

	tration Section ion of Corporations			
SUBJECT:	COOL FOR LESS, LLC	;		
	(Name of Lim	ited Liability Comp	any)	
The enclosed A	Articles of Organization and fee(s) are	e submitted for filin	g.	
Please return a	Il correspondence concerning this ma	atter to the following	<b>;</b> :	
MAF	RIA PAULINA BARRIEN	NTOS		
		(Name of Person)		
		(Firm/Company)		
1660	05 Meadow Gardens S	t		08 A
		(Address)		06 2!
Tam	pa, FL 33624			
	(C	ity/State and Zip Code	2)	08 AUG 25 PM 4: 48
For further inf	ormation concerning this matter, plea	se call:		<b>5</b> 0
Diego Ba		at (_813	918-7889	
	(Name of Person)	(Area Cod	e & Daytime Telephone Num	iber)
Enclosed is a	check for the following amount:			
]\$125.00 Fili	ng Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filir Certified Co (additional cop	py Certificate y is enclosed) Certified	ate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	ourier Address ion Section of Corporations duilding ecutive Center Circle see, FL 32301	

ARTICLES OF ORGANIZATION FOR I  ARTICLE I - Name:  The name of the Limited Liability Company i	FLORIDA LIMITED	LIABILITY COM	PANEY SEE
ARTICLE 1 - Name:			5 30
The name of the Limited Liability Company i	is:		25
COOL FOR LESS, LLC			PH F. F.
(Must end with the words "Limited Lia	ibility Company, "L.L.C.," or "L	LC.")	4.
ARTICLE II - Address:			<b>₩</b>
The mailing address and street address of the	principal office of the L	imited Liability Com	pany is:
Principal Office Address:	Mailing Address:		
16605 Meadow Gardens St	16605 Meadow Gardens	St	
TAMPA FL 33 CO24	TAMPA FL 330	024	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)	ed Office, & Registered gistered Agent. You must design	Agent's Signature: ate an individual or another	:
The name and the Florida street address of the	e registered agent are:	Effective Date	08/21/08
MARIA PAULINA E	BARRIENTOS		
Nam	<del></del>		
16605 Meadow Ga	rdens St		
Florida street a	address (P.O. Box NOT accep	ntable)	
Tampa, FL 33624	FL		
City, State	e, and Zip	<del></del>	
Having been named as registered agent and to liability company at the place designated in			

Mans Paulus Bauentes.
Registered Agent's Signature (REQUIRED)

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..

MGR	Diego Barrientos	
	16605 Meadow Gardens St	
	Tampa, FL 33624	
		<del></del>
		<b>E</b>
·		25
		<b>—</b>
(Use attachment if necessary)		f.

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

## **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.)

Maria P. Barrientos.

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)