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T. HAMPTON

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EXAMINER

COVER LETTER

	TO: Registration Section Division of Corporations
	SUBJECT: Tampa Corral, LLC
	(Name of Limited Liability Company)
	The enclosed Articles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
•	Desiree Hall
	(Name of Person)
	Tampa Corral, LLC
	(Firm/Company)
	7750 N MacArthur Blvd., #120-221
	(Address)
	Irving, TX 75063
	(City/State and Zip Code)
	For further information concerning this matter, please call:
	Desiree Hall 620-2287 x225
	(Name of Person) (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
	\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Status}\$\$ Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Tampa Corral, LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7750 N MacArthur Blvd., #120-221	7750 N MacArthur Blvd., #120-221
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
Capitol Corporate Se	rvices, Inc.
Name	
155 Office Plaza, Sui	te A
	ess (P.O. Box <u>NOT</u> acceptable)
Tallahasse	FL 32301
City, State, ar	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate. I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duttes, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	-2 A -2 A SSEE, FL
(CONTINU Page 1 of 2	

ARTICLE	IV-	Manager(s) or	Managing	Member 6	s):
	4 7	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 J U I		TATCHEDOL	~,

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Guillermo Perales
	7750 N MacArthur Blvd., #120-221
	Irving, TX 75063
(Use attachment if necessary)	
CLE V: Effective date, if other than to	the date of filing: NA (OPTIONA t be specific and cannot be more than five business day.
CLE V: Effective date, if other than the effective date is listed, the date mus	the date of filing: NA
CLE V: Effective date, if other than the effective date is listed, the date mus 0 days after the date of filing.)	the date of filing: NA (OPTIONA t be specific and cannot be more than five business day.
CLE V: Effective date, if other than the effective date is listed, the date mus 0 days after the date of filing.) REQUIRED SIGNATURE:	t be specific and cannot be more than five business day
CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document contains)	the date of filing: NA t be specific and cannot be more than five business day above or an authorized representative of a member. a section 608.408(3), Florida Statutes, the execution on stitutes an affirmation under the penalties of perjury ed herein are true.)
CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document contains)	nber of an authorized representative of a member. a section 608.408(3), Florida Statutes, the execution on stitutes an affirmation under the penalties of perjury ed herein are true.)
CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a ment of this document control that the facts stated.	nber of an authorized representative of a member. a section 608.408(3), Florida Statutes, the execution on stitutes an affirmation under the penalties of perjury ed herein are true.)

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

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

Page 2 of 2