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## **COVER LETTER**

TO: Registration Secti Division of Corpo		
SUBJECT: <u>FELIX</u>	PENA CANDS CAPING LL C  Name of Limited Liability Company	
The enclosed Articles of Or	ganization and fee(s) are submitted for filing.	
Please return all corresponde	ence concerning this matter to the following:	
Jose _	D. BARRANCOS RNH	
	Name of Person	
	Firm/Company  AHE  ROPM CT F  SSSS  TAKE	
	Firm/Company	۱ سب
3771	ROAN CT E SSE =	
	Address TP 3	7
	ROAN CT E  Address  Address  City/State and Zip Code	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information cond	cerning this matter, please call:	
JOSE D. BARRIA Name of Pe	erson at ( <u>561</u> ) <u>722 - 5610</u> Area Code & Daytime Telephone Number	
Enclosed is a check for the	e following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Status St	
R D P.	Initing Address     Street/Courier Address       Legistration Section     Registration Section       Livision of Corporations     Division of Corporations       Lifton Building     Clifton Building       Light all all all all all all all all all al	

Tallahassee, FL 32301

## 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> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	JOSE D. BARRANCOS PENA 3771 ROAN CT E LAKE PARK, FL 33463
	ZOO9 HA SECRE
(Use attachment if necessary)	ASSEE, FLO
(If an effective date is listed, the date must be sto or 90 days after the date of filing.)	ate of filing: <u>05-07-09</u> . (OPPIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:  Signature of a member of	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.)

JOSE D. BARRANCOS PENA
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)