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Special Instructions to Fili	ng Officer:		
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Office Use Only



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T. CLINE
JUL 1 6 2009
EXAMINER

COVER LETTER

SUBJECT:	STICKY SF	PANISH, LLC	
30bacer	(Name of Limite	d Liability Company)	
The enclosed Article	es of Organization and fee(s) are s	submitted for filing.	
Please return all corr	respondence concerning this matte	er to the following:	
	JESSIE	DEL CASTILLO	
 	(Name of Person)	
	1	(Firm/Company)	
	3750	Emerald Lane	
		(Address)	ALL SEC
	Mulbe	erry, FL 33860	AHA
Email Add		y/State and Zip Code)	2009 JUL 15 PM 12: 5 SECRETARY OF STATE ALLAHASSEE, FLORIC
	ion concerning this matter, please	call:	PH IZ
JESSIE DEL	CASTILLO	at (863) 944-7495	: 51 AYE DRIDA
(N	ame of Person)	(Area Code & Daytime Telephone N	Number)
Enclosed is a chec	k for the following amount:		
_/	ee \$130.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	.00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability (Company is:	
STI	CKY SPANISH, LLC	
(Must end with the words	s "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street add	ress of the principal office of the Limited Liability Compar	ıy is:
Principal Office Address:	Mailing Address:	
3750 Emerald Lane	3750 Emerald Lane	
Mulberry, FL 33860	Mulberry, FL 33860	ration(CP)
The name and the Florida street add	dress of the registered agent are:	
	Name	
37	750 Emerald Lane	
F	lorida street address (P.O. Box NOT acceptable)	
Mulber	ry _{FL} 33860	
	City, State, and Zip	
liability company at the place d registered agent and agree to act in statutes relating to the proper and accept the obligations of my po	agent and to accept service of process for the above stated lifesignated in this certificate, I hereby accept the appointment in this capacity. I further agree to comply with the provisions d complete performance of my duties, and I am familiar with esition as registered agent as provided for in Chapter 608, F. Agent's Signature (REQUIRED)	as of all and

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

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

MGR	JESSIE DEL CASTILLO 3750 Emerald Lane Mulberry, FL 33860	
	Au	2009
	- CONTRACTOR OF THE CONTRACTOR	
Use attachment if necessary)	ال الله الله الله	PH 72:
LE V: Effective date, if other than the	e date of filing: 📆 . 📆	PTION
days after the date of filing.)	specific and cannot be more than five busi	mess u

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.)

JESSIE DEL CASTILLO

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)