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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

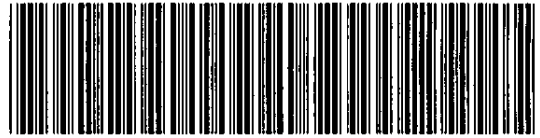
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 07 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pico Pollo, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven H. Osiason
Name of Person

Steven H. Osiason, CPA, PLLC
Firm/Company

3927 Venetian Way
Address

Tampa, Fl. 33634-7491
City/State and Zip Code

wilmingtonnunez@yahoo.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Steven H. Osiason at (813) 240-8687
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
Pica Pollo, LLC

← correct spelling

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: August 4, 2009

Wilmington Nunez
Signature of a member or authorized representative of a member

Wilmington Nunez
Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L09000071408
FILED 8:00 AM
July 24, 2009
Sec. Of State
ncausseaux

Article I

The name of the Limited Liability Company is:
PICO POLLO, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
6001 - 66TH TERRACE NORTH
PINELLAS PARK, FL. US 33781

The mailing address of the Limited Liability Company is:
P.O. BOX 1163
PINELLAS PARK, FL. US 33780

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
WILMINGTON NUNEZ
6001 - 66TH TERRACE NORTH
PINELLAS PARK, FL. 33781

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.

Registered Agent Signature: WILMINGTON NUNEZ

Article V

L09000071408
FILED 8:00 AM
July 24, 2009
Sec. Of State
ncausseaux

The name and address of managing members/managers are:

Title: MGRM
WILMINGTON NUNEZ
P.O. BOX 1163
PINELLAS PARK, FL. 33780 US

Signature of member or an authorized representative of a member

Signature: WILMINGTON NUNEZ