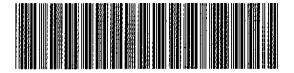
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(Requestor's Name)	
(Address)	•
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Duginara Entitu Nama)	: ;
. (Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	

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C. LEWIS

JUL 3 1 2009

EXAMINER

COVER LETTER

TO: Registration Section

Division o	of Corporations	
SUBJECT:	LA BURBU	JA MOBILE CAR WASH
	Name of Limit	red Liability Company
The enclosed Artic	les of Organization and fee(s) are	submitted for filing.
Please return all co	rrespondence concerning this mat	ter to the following:
	CARLO	OS L. RODRIGUEZ
		Name of Person
		Firm/Company
	201 WES	ST 65 STREET #210
		Address
		LEAH, FL 33012 ty/State and Zip Code
		072974@YAHOO.COM
		for future annual report notification)
For further informa	tion concerning this matter, pleas	e call:
	OS L. RODRIGUEZ	at (
Enclosed is a chec	ck for the following amount:	
万\$125.00 Filing F	cee \$\int \\$130.00 \text{ Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional 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 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:
	BILE CAR WASH, LLC
(Must end with the words "Limite	d Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
201 WEST 65 ST #210 HIALEAH, FL 33012	201 WEST 65 ST #210 HIALEAH, FL 33012
ARTICLE III - Registered Agent, Registre Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another
The name and the Florida street address o	f the registered agent are:
ROSE	M. CHAZULLE
	Name
1759	9 NW 31 ST ss (P.O. Box NOT acceptable)
Florida street addres	s (P.O. Box NOT acceptable)
MIAMI	FL 33142 \$ \frac{1}{2}
City,	State, and Zip
Transfer to the transfer to	the second and its formance for the above stated limited

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 as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

. . . **.** . .

FILED

<u>Title:</u> "MGR" = Manager		ng Member(s): or Managing Member is as follow Name and Address:	SECRETARY OF TALLAHASSEE,
"MGRM" = Managi	ing Member	Carlos L. Rodrig	
MGR		201 WEST 65 ST #210	
MOIX		HIALEAH, FL 33012	·
			11. 12. 12. 12. 12. 13. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14
(Use attachment if n	necessary)		
`	• ,		
LE V: Effective date	e, if other than the date	of filing: 08/01/2009	(OPTIONAL)
fective date is listed days after the date		ecific and cannot be more than	five business days pri
davs aner the date	or ming.)		
,	ATUDE.		
REQUIRED SIGN	ATURE:		
•	ATURE:		
REQUIRED SIGN		an authorized representative of a m	ember.
REQUIRED SIGN	gnature of a member or	an authorized representative of a m	
REQUIRED SIGN Sign	gnature of a member or	608.408(3), Florida Statutes, the exec	ution
REQUIRED SIGN Sign (II	gnature of a member or	608.408(3), Florida Statutes, the exects an affirmation under the penalties of	ution

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