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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pepino's Pools, 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: Jose Alberto Perez-Flores Name of Person Pepino's Pools, LLC Firm/Company 391 N.W. 35th Court Address Oakland Park, fLORIDA 33309 City/State and Zip Code mommablu18@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jose A. Perez-Flores ₃851-2111 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: □\$125.00 Filing Fee . □\$130.00 Filing Fee & ■\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street/Courier Address Mailing Address Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is | 3: |
|--|---|
| Pepino's Pools, LLC | |
| (Must end with the words "Limited Liab | oility Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the p | principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 391 N.W. 35th Court | 391 N.W. 35th Court |
| Oakland Park, FL 33309 | Oakland Park, FL 33309 |
| Name | registered agent are: |
| 10315 Grove | - Cane |
| Florida street ac | ddress (P.O. Box NOT acceptable) |

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)

Cooper City FL
City, State, and Zip

(CONTINUED)
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 | Name and Address: | | |
|------|-------------------------------------|--|---------------|---|
| | "MGRM" = Managing Member | | | |
| | MGR | Jose A. Perez-Flores | | |
| | | 391 N.W. 35th Court | | |
| | | Oakland Park, FI 33309 | | |
| | MGRM | Mariann C. Perez | | |
| | | 391 N.W. 35th Court | 2[| |
| | | Oakland Park, FL 33309 | 3 | |
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| | (Use attachment if necessary) | | | |
| ARTI | CLE.V: Effective date if other than | the date of filing: April 15, 2010 . (OPTIOI | VAL) | |
| | | st be specific and cannot be more than five business d | | r |
| | 0 days after the date of filing.) | | | _ |
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| | | 11 11 11 | | |
| | REQUIRED SIGNATURE: | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | |
| | | | | |
| | Signature of a men | mber of an acthorized representative of a member. | | |
| | (In accordance with | h section 608.408(3), Florida Statutes, the execution | | |
| | of this document co | onstitutes an affirmation under the penalties of perjury | | |
| | that the facts stated | l herein are true.) | | |

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)

Jose A. Perez-Flores

Page 2 of 2

Typed or printed name of signee