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EXAMINER

COVER LETTER

	TO: Registration Section Division of Corporations			
	SUBJECT: Lois Portillo 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:				
	- Luis Portillo			
Luis Portillo LLC Firm/Company				
	2215 W Jefferso St Lot 42			
	Quincy FL 32351 \(\frac{7}{200}\) City/State and Zip Code	=		
	E-mail address: (to be used for future annual report notification)	5 -		
For further information concerning this matter, please call:				
	Jus Portillo at (850) 210-9800 57			
	Enclosed is a check for the following amount:			
	\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclose	tus &		
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
(Must end with the words "Limited 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:
adis w. Jefferson St. Lot 42
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatures (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Luis Portillo Name N
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 a 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

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Luis Portillo
	Quincy, Fl. 32351
MGRM	Victor Zimora 2315 W. Jefferson St. Lot 42 Quincy, Fl. 32351
	- COUNCY PI. 3233 /
(Use attachment if necessary)	
	an the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	***************************************
REQUIRED SIGNATURE:	SECKE?
Luch	Postillo SSE
Signature of a r	nember or an authorized representative of a member.
constitutes an affirmation I am aware that any false	on 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true information submitted in a document to the Department of State is felony as provided for in s.817.155, F.S.)
2	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)