

04/20/2030 05:41

#0009 P.001/004

FLORIDA DEPARTMENT OF STATE
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax number (shown below) on the top and bottom of all pages of the document.

((H12000152485 3)))



H120001524853ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

12 JUN - 7 PM 4: 39

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
SIR PIZZA DOWNTOWN L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

ATTN: BUCK

Electronic Filing Menu

Corporate Filing Menu

Help

B. KOHR

JUN - 8 2012

EXAMINER

04/20/2030 05:41

#0009 P.002/004

H12000152485

June 7, 2012

JUN -7 PM 4:39

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of Sir Pizza DOWNTOWN INC.
of Doc # P12000052052 are the same owners of the attached
ARTICLES OF ORGANIZATION

Thank you for your help in this matter.

Very sincerely,

Eduardo Atienza

H12000152485

H12000132485

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SIR PIZZA DOWNTOWN L.L.C.

(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:9240 SW 64TH ST. MIAMI, FL 33173Mailing Address:9240 SW 64TH ST. MIAMI, FL 33173

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

EDUARDO ATIENZA

Name

9240 SW 64TH ST.Florida street address (P.O. Box NOT acceptable)MiamiFL 33173

City, State, and Zip

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.

Eduardo Atienza

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H12000152485

H12000152485

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

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

Title:

"MGR" = Manager

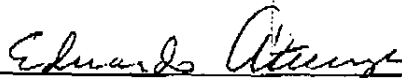
"MGRM" = Managing Member

Name and Address:MGRMEDUARDO ATIENZA9240 SW 64TH ST.MIAMI, FL 33173MGRMJUVENAL E. MARTINEZ10455 SW 58TH ST.MIAMI, FL 33165

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

EDUARDO ATIENZA

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)**

H12000152485