

L13000170104

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 audit number (shown below) on the top and bottom of all pages of the document.

((H13000268120 3)))



H130002681203ABCX

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 : DAVID C. HASTINGS, CPA, PA
 Account Number : I20000000168
 Phone : (727) 322-0909
 Fax Number : (727) 322-0520

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

Email Address: DAVIDCPA@TAMPABAY.BB.COM

2013 DEC -9 AM 8:29
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

FLORIDA LIMITED LIABILITY CO.
 BLACK PALM RESTAURANT OF ST PETE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Dec. 9, 2013 9:27AM

No. 8269 P. 1

850-617-6381

12/9/2013 8:53:01 AM PAGE 1/001 Fax Server



December 9, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DAVID C HASTINGS CPA

SUBJECT: BLACK PALM RESTAURANT OF ST PETE, LLC
REF: W13000067002

Sorry

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Article IV list the name of the MGRM.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neyya Culligan
Regulatory Specialist II

FAX Aud. #: H13000268120
Letter Number: 013A00027914

RECEIVED
13 DEC-9 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

H130002681203

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

MGRM**Name and Address:**

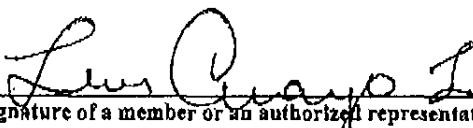
Luis Arango

1700 PARK ST N

ST PETERSBURG, FL 33710

(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:


Luis Arango, Jr.

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.)

LUIS ARANGO, JR

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)**

2013 DEC -9 AM 8:29
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

H130002681203