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DEC 1 7 2013 T. HAMPTON

COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	PAUL MANCHISI Name of Person
	RTO TECERO LESTAVEANT, 'LLC'. Firm/Company
	3960 Cuery For RD
	City/State and Zip Code City/State and Zip Code Paul Manch 1Si @ Gol. Com E-mail address: (to be used for future arrhual report notification)
-	E-mail address: (to be used for future arithual report notification)
For fur	ther information concerning this matter, please call:
	Name of Person at (407) 895-9422 Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:
□\$125.	00 Filing Fee U\$130.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy, (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ÁRTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	TICL	ΕI	- Na	me:

The name of the Limited Liability Company is:

RTO TECREO RESTAURANT "L.L.C." (Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
3960 Cery FOR Q.)	3960 Cury For R
DRLANDO, AL 32366	DRLANDO FL 32806

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:

PAUL MANCHISI	
Name	
3960 CURRY FORD KI)	
Florida street address (P.O. Box NOT acceptable	e)
0 RLANDO FL 32806	
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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 "MGRM" = Managing Member	Name and Address:
MGR	PAUL MANCHS. 3960 CURY FORD ELD DRIAM R. 3280L
MGRM	CARINA MANCHISI 2035 DIXIT Belle DR 0244000, R 32812
(Use attachment if necessary) CLE V: Effective date, if other that	n the date of filing: (OPTIONAL)
CLE V: Effective date, if other than	n the date of fiting: (OPTIONAL) must be specific and cannot be more than five business ng.)
CLE V: Effective date, if other that effective date is listed, the date is or 90 days after the date of filin REQUIRED SIGNATURE:	must be specific and cannot be more than five business
CLE V: Effective date, if other that effective date is listed, the date is or 90 days after the date of filing REQUIRED SIGNATURE: Signature of a medical constitutes an affirmation of I am aware that any false is	must be specific and cannot be more than five business ag.)
CLE V: Effective date, if other that effective date is listed, the date is or 90 days after the date of filing REQUIRED SIGNATURE: Signature of a medical constitutes an affirmation of I am aware that any false is constitutes a third degree of	ember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
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