15000003134

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(0	ity/State/Zip/Phone	#)
	☐ WAIT	MAIL
PICK-UP	L WAII	L. WAIL
•	•	
(Bi	usiness Entity Nam	e)
(D	ocument Number)	
Certified Copies	Certificates	of Status
-		
	•	
Special Instructions to	Filing Officer:	
		1



700267541957

12/23/14--01018--001 **1550.00

EFFECTIVE DATE 01015

COffice Use Only

JAN 07 2015 , BRUCE

COVER LETTER

TO: Registration Division of	n Section Corporations				
SUBJECT: REYN	OSO HOLDINGS FIVE, LL Name of Li	.C mited Liability Company			
. The enclosed Articles	s of Organization and fee(s) a	re submitted for filing.			
Please return all corre	espondence concerning this m	natter to the following:			
JOHN A	. DWYER, ESQUIRE	Name of Person			
JOHN A	. DWYER, ESQUIRE				
		Firm/Company			
506 Nor	th Alexander Street	Address		_	
		Address	- 	201 : 5	
Plant Cit	v. Florida 33563				4
iodunar@plont	citylawyers.com	City/State and Zip Code	شر خ ن	DEC 23	
Jauwyengypiani	E-mail address: (to be use	d for future annual report notifica	ation)		
For further information	on concerning this matter, plea	ase call:	(PH 3: 15 OF STATE	Ü
John A. Dwyer, Eso Nar	ne of Person		lephone Number	<u> </u>	
Enclosed is a check for	or the following amount:				
☐ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	✓\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enc	s &	
	iling Address istration Section	Street/Courier Add Registration Section	<u>ress</u>		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

REYNOSO HOLDINGS FIVE, LLC		,
	ted Liability Company, "L.L.C.," or "LI	.C.")
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Compar	ny is:
Principal Office Address:	Mailing Address:	
3536 Tommy Brock Place Plant City, Florida 33566	3536 Tommy Brock Place Plant City, Florida 33566	
ARTICLE III - Registered Agent, Registered Offic (The Limited Liability Company cannot serve as its ovanother business entity with an active Florida registra.) The name and the Florida street address of the register Manuel Reynoso	wn Registered Agent. You must designation.)	
Manuel Reviioso		7
Narido 130 y 1000 Narido 130 y 1000	me	2014 (
Nar	me	NA DEC
		ON DEC 23 SEGRETARY ALLI AHASS
Nar <u>3536 Tommy Brock Place</u> Florida street address (P.O. B		DEC 23 SAETARY CAHASSE
Nar 3536 Tommy Brock Place	Box NOT acceptable)	IN DEC 23 PM 3: SEGRETARY OF ST ALLI AHASSEE FLO

Page 1 of 2

EFFECTIVE DATE 01/01/15

"AMBR" = Authorized Member	Name and Address:
	
"MGR" = Manager	
MRG	Manuel Reynoso
	3536 Tommy Brock Place
	Plant City, Florida 33566
MRG	Graciela Reynoso
	3536 Tommy Brock Place
	Plant City, Florida 33566
	
ective date is listed, the date must be sp	of filing: January 1,2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days a
EV: Effective date, if other than the date	of filing: January 1,2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the date ective date is listed, the date must be sporf filing.) E VI: Other provisions, if any.	of filing: January 1,2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the date ective date is listed, the date must be spor filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the date ective date is listed, the date must be spor filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60)	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the date ective date is listed, the date must be spor filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60) constitutes an affirmation unde	mber or an suctionized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document representative of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ective date is listed, the date must be spor filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation unde I am aware that any false inforr	mber or an suctionized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document representative of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ective date is listed, the date must be spor filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation unde I am aware that any false inforr	mber or an suthorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document rate penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a meter o	mber or an suthorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document rate penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a meter o	mber or an suctionized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document representative of perjury that the facts stated herein are true. mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a meter o	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)