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(Re	questor's Name)
(Ad	dress)	
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(Cit	y/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	



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2015 JAN -6 PM 4: 22
SECRETARY OF STATE
SECRETARY OF STATE

Office Use Only

EFFECTIVE DATE OF 12 15

HAN B 2015

COVER LETTER

	egistration Section ivision of Corporations			
	: Pala Cantina LLC			
SUBJECT:	Name of Limited Liability Company			
The enclosed	ed Articles of Organization and fee(s) are submitted for filing.			
Please return	rn all correspondence concerning this matter to the following:			
	Denise Lade			
-	Name of Person			
	PAPa Cantina LLC Firm/Company			
-	Firm/Company			
	148 Miami St			
.	Address			
_	Miramar Beach Florida City/State and Zip Code Beachstarr 4200 cof. net	32550		
	City/State and Zip Code	AC	2015 JAN -6	****
	E-mail address: (to be used for future annual report notification)	'높음	JA.	
r - 6 - 4 :		*S:	1-6	
ror turtner i	information concerning this matter, please call:	SEE Y		
Deni	ise lade at 850, 217 1191	F.C.	⊐×	
	Name of Person Area Code Daytime Telephone	ARY OF STATE ASSEE FLORIDA Number	PM 4: 22	•
Enclosed is	a check for the following amount:			
\$125.00 Fili	ling Fee \$\sum_\$\\$130.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}\$	0.00 Filing Fee, tificate of Status & tified Copy tional copy is enclos		
	Mailing Address Street/Courier Address			
	Registration Section Registration Section Division of Corporations Division of Corporations			

Registration Section
Division of Corporation
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

ARTICLE I - Name:
The name of the Limited Liability Company is:
Pala Cantina LLC
(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:
152 Miami St 148 Miami St Miramar Beach FI Miramar Beach
32520 E1 32520
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:
Denise Lade
Name
148 Miami St
Florida street address (P.O. Box NOT acceptable)
Miraman Beach FL 32550 City Zip
City 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 605, F.S
Deni Lale
Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

ETTECTIVE DATE OF HOLD

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	- / /-
MGR	Danisa Lade
	148 Miami St
	Misumar Beach F1 325
AMBR	Kathy Raborn Raborn
1 3 1 1 % hour stagement	1570 Silliman
	Baton Rouge La 70808
<u>. </u>	
AMBE	John Bacino
	5228 Kawance
	Metairie La 70006
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	date of filing:
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ARTICLE IV-