

# / 15000053693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

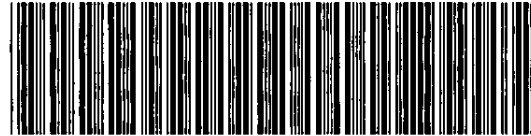
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400270253664

EFFECTIVE DATE  
3-12-2015

400270253664  
03/09/15--01026--013 \*\*125.00

FILED  
2015 MAR -9 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAR 26 2015

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Taqueria La Costena, LLC**  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angela Jimenez  
Name of Person

Taqueria La Costena, LLC  
Firm/Company

4103 N. Armenia Ave.  
Address

Tampa, FL 33607  
City/State and Zip Code

ajimenez0703@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Jimenez at ( 813 ) 956-5006  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee       \$130.00 Filing Fee & Certificate of Status       \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)       \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

EFFECTIVE DATE  
3-12-2015

ARTICLES OF ORGANIZATION  
OF  
TAQUERIA LA COSTENA, LLC

FILED  
2015 MAR -9 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I – NAME

The name of the limited liability company is Taqueria La Costena, LLC, ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:  
4103 N. Armenia Avenue  
Tampa, FLorida 33607

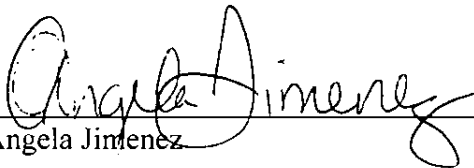
Mailing Address:  
4103 N. Armenia Avenue  
Tampa, FLorida 33607

ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Angela Jimenez  
4103 N. Armenia Avenue  
Tampa, Florida 33607

*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.*

  
Angela Jimenez

ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

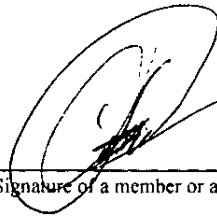
<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"AMBR" = Authorized Member	
 MGR	Angela Jimenez 4103 N. Armenia Avenue Tampa, FL 33607
 MGR	Leobardo Jimenez 4103 N. Armenia Avenue Tampa, FL 33607

FILED  
 2015 MAR -9 PM 3:51  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be March 12, 2015.

REQUIRED SIGNATURE:



\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 605.205(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Angela Jimenez  
\_\_\_\_\_  
Typed or printed name of signee