

LIS000183314

(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:

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10/23/15--01024--019 **125.00

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OCT 29 2015

T. SCOTT

KORSHAK & ASSOCIATES, P.A.
ATTORNEYS AT LAW

STEPHEN D. KORSHAK †
skorshak@korshaklaw.com

LEE KARINA DANI
lkd@korshaklaw.com

BRADFORD PETRINO
bpetrino@korshaklaw.com

† ALSO ADMITTED IN ILLINOIS

October 21, 2015

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

VIA OVERNIGHT MAIL

Re: New Filing – Fiesta FroYo Plus, LLC

Dear Sir or Madam:

Herein enclosed is the please the Cover Letter and Articles of Organization for the referenced company along with a check for \$125.00 for the filing fee.

Should you have any questions, please do not hesitate to contact me.

Yours truly,

/s/ Lee Karina Dani

Lee Karina Dani
Attorney at Law

Enclosures – as stated

www.korshaklaw.com
950 S WINTER PARK DRIVE, SUITE 320, CASSELBERRY, FL 32707
Office: (407) 855-3333 · Facsimile: (407) 855-0455

South Office (by Appointment Only): 13574 Village Park Dr., Suite 235, Orlando, FL 32837

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Piasta FroYo Plus, 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:

Fabiana Neto

Name of Person

Firm/Company

5040 Walnut Ridge Drive

Address

Orlando, Florida 32829

City/State and Zip Code

fiestafroyo@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fabiana Neto

914

310-7071

at ()

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

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

Street Address

New Filing 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:

Piesta FroYo Plus, 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:

504 N. Alafaya Trail #113, Orlando, FL 32828

Mailing Address:

504 N. Alafaya Trail #113
Orlando, FL 32828

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:

Fabiana Neto

Name

504 N. Alafaya Trail #113

Florida street address (P.O. Box **NOT** acceptable)

Orlando

Florida

32828

City

State

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

Name and Address:

Fabiana Neto

504 N. Alafaya Trail #113

Orlando, Florida 32828

Marcelino Neto

504 N Alafaya Trail #113

Orlando, Florida 32828

(Use attachment if necessary)

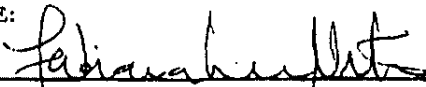
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Fabiana L. Neto

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)