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COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	EL Patron Mex	inited Liability Company	
The enclosed	Articles of Organization and fee(s) a	are submitted for filing.	
Please return	all correspondence concerning this r	natter to the following:	
	Jose M	Name of Person	-
_	EL Patron M	Firm/Company	-
_	4136 Jour	th Oates Street Address	-
_	Dothan	City/State and Zip Code	-
_	E-mail address: (to be use	d for future annual report notification)	-
For further info	rmation concerning this matter, pleas	se call:	
<u> 7</u>	Name of Person	Area Code Daytime Telephone Number	
Enclosed is a	check for the following amount:		
\$125.00 Filing	g 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 enclo	
	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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2015

JOSE M. DOMINGUEZ 708 JEWELL FARMS RD CHIPLEY, FL 32428

SUBJECT: EL PATRON MEXICAN GRILL & CANTINA LLC

Ref. Number: W15000073876

We have received your document for EL PATRON MEXICAN GRILL & CANTINA LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II

Letter Number: 515A00024415

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

El Patron Mexican Drill tCantinaILLC (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:
708 Sevell Farm Rd	L/636 S. Dates street
Chipky Fr 32428	Dothan AL 310301

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:

Name

708 Sewell Farm 12d

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

Chipley FL 32428

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..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBIZ - ML- R	Jose Dominguez 708 Sewell Form 12d Chipley Fr 32423
(Use attachment if necessary)	
an effective date is listed, the date must be sp e date of filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed a of State's records.
RTICLE VI: Other provisions, if any.	

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.

Typed or printed name of signed

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)