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COVER LETTER

Division of Corporations
SUBJECT: Torranos Enterprises, 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:
Redro A. Servano Name of Person
Name of Leison
Firm/Company
2603 Sandy In.
Delando FL. 32818 City/State and Zip Code Dedroserranohernandez @ yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number 407 600- 2286
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$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

AF	lT	IC	LE	I	-	Name:
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The name of the Limited Liability Company is:

Torranos Enterprises 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:
2603 Sandu Ln.	2603 Sandu Ln.
O-lando FL:	Oxlando FL.J
32.818	32818

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:

Pedro A. Serrano

Name

2603 Sandy Ln.

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

Orlando FL. 32818

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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Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMDR	Omar Serrano 2603 Sandy In: Orlando FL 32818
AMBR	Evelyn Torres 2603 Sandy In. O-lando FL. 32818
Use attachment if necessary)	
EV: Effective date, if other than the ctive date is listed, the date must f filing.) the date inserted in this block does	e date of filing: (OPTIONAL) De specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will no
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E V: Effective date, if other than the ctive date is listed, the date must filling.) the date inserted in this block does nent's effective date on the Department of the Depar	not meet the applicable statutory filing requirements, this date will no
ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Departs E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is e I am aware that any	not meet the applicable statutory filing requirements, this date will no

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

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

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