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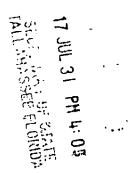
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Certified Copies	Certificates	s of Status
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## Terence Matthews, Chartered 5190 26th Street West, Suite D

Bradenton Florida 34207-2200

Telephone: (941) 755 - 8583 Primary E: tmlaw.office@verizon.net

Secondary E: tmlaw.lisa@gmail.com Website: www.tmatthewslaw.com

July 26, 2017

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Facsimile: (941) 753 – 8479

SUBJECT: EL PAISANO MEXICANO, LLC

Your Ref. Number: W17000059148

To Whom It May Concern:

Please find enclosed the following items for the above-named company:

- 1. Copy of your letter dated July 18, 2017 for your reference;
- 2. An original and a duplicate copy of the Cover Letter, Articles of Organization for Florida Limited Liability Company.

At this time, no certified copies are needed.

If you have any questions or require further information, please contact our office.

Sincerely,

Lisa A. Sanford, FRP

Paralegal for Terence Matthews, Esq.

Lica a Sanford

Enclosures



July 18, 2017

TERENCE MATTHEWS, CHARTERED 5190 26TH STREET WEST, SUITE D BRADENTON, FL 34207-2200

SUBJECT: EL PAISANO MEXICANO, LLC.

Ref. Number: W17000059148

We have received your document for EL PAISANO MEXICANO, LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Letter Number: 717A00014514

Neysa Culligan Regulatory Specialist II

#### **COVER LETTER**

TO:

**New Filing Section Division of Corporations** 

SUBJECT:

EL PAISANO MEXICANO, 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:

#### DEBORAH BELLVILLE

Name of Person

Firm/Company

### 914 34<sup>TH</sup> AVENUE WEST Address

#### **BRADENTON, FLORIDA 34205**

City/State and Zip Code

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

For further information concerning this matter, please call:

DEBORAH BELLVILLE at (941) 242-2334

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 LIABILITYCOMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

#### EL PAISANO MEXICANO, LLC

(Must contain 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:**

5803 15 <sup>TH</sup> STREET EAST	5803 15 <sup>TH</sup> STREET EAST
BRADENTON, FLORIDA 34203	BRADENTON, FLORIDA 34203

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:

#### **DEBORAH BELLVILLE**

Name

#### 914 34TH AVENUE WEST

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

#### BRADENTON, FLORIDA 34205

City State

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.

X Debroh Bellelle
Registered Agent's Signature (REQUIRED)

(CONTINUED)

The name and address of each person authorize Company:	led to manage and control the Limited Liability
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
☑ AMBR ☑ MGR	DEBORAH BELLVILLE 914 34 <sup>TH</sup> AVENUE WEST BRADENTON, FLORIDA 34205
⊠ AMBR ⊠ MGR	SANTOS AGUIRRE  314 37 <sup>TH</sup> AVENUE WEST  BRADENTON, FLORIDA 34205
(Use attachment if necessary)	
(If an effective date is listed, the date must be days prior to or 90 days after the date of filin Note: If the date inserted in this block does not i	date of filing: (OPTIONAL) specific and cannot be more than five business g.) meet the applicable statutory filing requirements. ective date on the Department of State's records.
ARTICLE VI: Other provisions, if any.	17 JUL 31
REQUIRED SIGNATURE:	THE STATE OF SHATE OF

ARTICLE IV-

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.

#### **DEBORAH BELLVILLE**

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)