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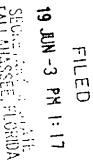
(Requestor's Name)
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N CULLIGAN JUN 3 2019

COVER LETTER

	New Filing Section Division of Corporations
en n rez	PIZZA EXPRESS OCALA LLC
SUBJEC	Name of Limited Liability Company
The encle	osed Articles of Organization and fee(s) are submitted for filing.
Please re	urn all correspondence concerning this matter to the following:
	JENIS MEDINA MAZARIEGOS
	Name of Person
	PIZZA EXPRESS OCALA LLC
	Firm/Company
	2602 SW 19TH AVENUE RD #104
	Address
	Ocala FL 34471
	City/State and Zip Code jenismedina2011@hotmail.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	JENIS MEDINA MAZARIEGOS 954 801 0862
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00	
·	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



May 22, 2019

JENIS MEDINA MAZARIEGOS 2ND ML 5920 NW 57TH COURT OCALA, FL 34482

SUBJECT: PIZZA EXPRESS OCALA LLC

Ref. Number: W19000047229

We have received your document for PIZZA EXPRESS OCALA 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):

You must complete ARTICLE III. and the REGISTERED AGENT must sign.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 619A00009691

2019 UNH -3 PH 1: 52

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Pl	IZZA EXPRESS OCAI	LA LLC	
(Must cor	ntain the words "Limited	Liability Company.	"L.L.C.," or "L.L.C.")	-
ARTICLE II - Address: The mailing address and street	address of the principal o	ffice of the Limited	l Liability Company is:	
Princi	pal Office Address:		Mailing Address:	
5920 NW 57th Court	t Ocala FL 34482			
· · · · · · · · · · · · · · · · · · ·				
	• •• •••••			
RTICLE III - Registered As				
			You must designate an individu	ual or
nother business entity with an	i active Florida registratio	on.)		
he name and the Florida stree	et address of the registered	l avent are:		- 1.
	_	_		= ≥ £ '9
	Jenis N	<u>Ned, Do</u>	1/19 Car (go	25
			Mazariego	25
			,	July -3
	5920NW Florida street address	57th COL	18)	SANIASSEE
	5920 NW Florida street address	57th COU s (P.O. Box <u>NOT</u> a	18)	JAHASSEEL FL
	5920 NW Florida street address	57th COL	18)	SAHASSEE FLOR

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager **AMBR** JENIS MEDINA MAZARIEGOS 5920 NW 57TH CT OCALA FL 34482 MGR Manuel J Tamay 1815 NW 2nd Street Ocala FL 34470 PRESIDENT JUVENTINA R MELGAR GARCIA 5920 NW 57TH CT OCALA FL 34482 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ____ (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 sixed 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.

JENIS MEDINA

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)