123000236067

(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:
oposial monacions to 1 ming officer.

Office Use Only



900408655879

RIVING.

SECRETARY 12 AM 8: 29

FILED

RECEIVED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 - Tallahassee, Florida 32301 (850) 224-8870 - 1-800-342-8062 - Fax (850) 222-1222

LA CANCHA LLC					
Please Debit 12000000)0257 For: 125				
Thank you Seth Neele	у				
Staff			Art of Inc. File	23 (A)	
			LTD Partnership File		
			Foreign Corp. File	— 123 — 125 — 126	
			L.C. File	eren eri	[17
			Fictitious Name File		J
			Trade/Service Mark	31 A S 29	
			Merger File		
			Art, of Amend. File		
			RA Resignation		
			Dissolution / Withdrawal		
			Annual Report / Reinstatement_		
			Cert. Copy		•
			Photo Copy Certificate of Good Standing		
			Certificate of Status		
			Certificate of Fictitious Name		
			Corp Record Search		
,			Officer Search		
	/		Fictitious Search		
- Stage			Fictitious Owner Search		
Signature			Vehicle Search	<u>.</u>	
			Driving Record	-	
Requested by: SETH	05/11		UCC 1 or 3 File		
Name	Date Time		UCC 11 Search	_	
Mattic	Date 11me		UCC 11 Retrieval	<u> </u>	
Walk-In Thomselve GA Arcc	Will Pick Up		Courier		

		COVER LETTER	
то:	New Filing Section Division of Corporations		
SUBJEC	LA CANCHA LLC CT:		
	Name o	of Limited Liability Company	
The enci	osed Articles of Organization and fee((s) are submitted for filing.	
Please ro	eturn all correspondence concerning th	is matter to the following:	
	ARNOLD M. STRAUS, JR.		
		Name of Person	
	STRAUS & ASSOCIATES, P.A.		
		Firm/Company	
	10081 Pines Blvd., Ste. C		23 MAI SECRE ALLAID
		Address	- F
	Pembroke Pines, Florida 33024		12 At 6
	sstraus@strauslegal.com	City/State and Zip Code	<u> </u>
		used for future annual report notification	on) 22
For furthe	r information concerning this matter, p	please call:	
	Arnold M. Straus, Jr.	954 431-2000	
	Name of Person	Area Code Daytime Telephone	Number
Enclosed	is a check for the following amount:		
	00 Filing Fee \$\square\$		□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations	Street Address New Filing Section Div	
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 32303	t, Suite 810

LA CANCHA LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

10081 Pines Blvd., Ste. C	10081 Pines Blvd., Ste. C
Pembroke Pines, Florida 33024	Pembroke Pines, Florida 33024

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Amold M. Stenus Jr.

(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	
10081 Pines Blvd., St	e. C	
Florida street address	(P.O. Box NOT acc	ceptable)
n 1 n	Florida	33024
Pembroke Pines	rioriua	23024

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 processing agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	EMANUEL GIMENEZ 10081 PINES BLVD., STE. C PEMBROKE PINES. FLORIDA 33024
MGR	NORMA C. DAVALOS 10081 PINES BLVD. STE. C PEMBROKE PINES. FLORIDA 33024
(Use attachment if necessary)	A co
n effective date is listed, the date must be s late of filing.) e: If the date inserted in this block does not	te of filing: (OPTIONAL)
focument's effective date on the Departmer ICLE VI: Other provisions, if any.	nt of State's records.
TODE VI. Other provisions, it any.	

ARNOLD M. STRAUS, JR., AUTHORIZED REPRESENTATIVE 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)

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 5.00 Certificate of Status (Optional)