

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)517-6381

From:
Account Name : CG TAX, INC.
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA LIMITED LIABILITY CO.
EL GRINGO, LLC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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DIVISION OF CORPORATIONS
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STATE OF FLORIDA
TALLAHASSEE, FL

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Electronic Filing Menu

Corporate Filing Menu

Help

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

EL GRINGO, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

EL GRINGO, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**6321 BIRD RD
MIAMI, FL. 33155**

The mailing address shall be:

**6321 BIRD RD
MIAMI, FL. 33155**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

CINDRY, LEON

6321 BIRD RD
Florida Street address (P.O. BOX NOT acceptable)
MIAMI, FL. 33155
City, State, and Zip

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Y OF 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.



REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

LEON, CINDRY
6321 BIRD RD
MIAMI, FL 33155

AMBR

LOPEZ, ROBERTO
6321 BIRD RD
MIAMI, FL 33155

MANAGER



Signature of a member or an authorized representative of a member.

(In accordance with section 805.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CINDRY, LEON

Typed or printed name of signer

CLERK OF STATE
TALLAHASSEE, FL

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