

10/25/23, 1:25 PM

H23000372514 3
Division of Corporations
H23000372514 3Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((1123000372514 3)))



H230003725143ABC.

Note: DO NOT hit the REFRESH-RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : FLL BUSINESS SOLUTION CORP
Account Number : 120190000092
Phone : (754)202-8663
Fax Number : (786)636-3620

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

Email Address: FLLBusiness@outlook.comFLORIDA LIMITED LIABILITY CO.
ENANOS BURGERS WYNWOOD LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

Florida Department of State
Division of Corporations
H23000372514 3

2023 OCT 27 PM 2:22

FILED

RR

H23000372514 3

H23000372514 3

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: ENANOS BURGERS WYNWOOD 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:

XIANNY CHINCHILLA

Name of Person

FLL BUSINESS SOLUTION CORP

Firm/Company

8350 W STATE ROAD 84

Address

DAVIE, FL. 33324

City/State and Zip Code

FLLbusiness@outlook.com

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

For further information concerning this matter, please call:

XIANNY CHINCHILLA

754

2028663

at ()

Name of Person

Area Code

Daytime Telephone Number

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATE
TALLAHASSEE, FL

2023 OCT 27 PM 2:22

FILED

H23000372514 3

H23000372514 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ENANOS BURGERS WYNDWOOD 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:55 NE 5th Street Apt 4725Miami, FL 3313255 NE 5th Street, Apt 4725Miami, FL 33132

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:

MARLON Y. MORALES HURTADO

Name

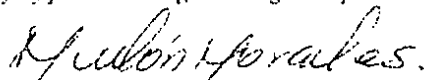
5851 Toscana Dr Apt 1724Florida street address (P.O. Box **NOT** acceptable)DavieFlorida33314

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)

H23000372514 3

FILED
 2023 OCT 27 PM 2:22
 STATE
 PALM BEACH, FL

H23000372514 3

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR _____

MARLON Y. MORALES HURTADO
 5851 Toscana Dr Apt 1724
 Davis, FL 33314

MGR _____

CARLOS M. MEDINA
 9119 32nd Ave. Floor 2
 East Elmhurst, NY 11369

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/15/2023 (OPTIONAL)

(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 listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:

THE PURPOSE IS A MOBILE RESTAURANT EQUIPED TO COOK, PREPARE, SELL AND SERVE FOOD (FOOD TRUCK) ANY ALL LAWFUL RELATED BUSINESS

REQUIRED SIGNATURE:

[Signature of Marlon Y. Morales Hurtado] *[Signature of Carlos M. Medina]*

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.

MARLON Y. MORALES HURTADO // CARLOS M. 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)

STATE
 DEPARTMENT OF
 TREASURY
 TALLAHASSEE, FL

2023 OCT 27 PM 2:22

FILED

H23000372514 3