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PILLS
2010 JUN 30 PM 2: 05
SECRETARY OF STATE
AND ANASSEE, FLORIDA

T. CLINE

JUL - 1 2010

**EXAMINER** 



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2010

STEVEN LEVY 2320 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020

SUBJECT: LA PIZZARRIA LLC Ref. Number: W10000029274

We have received your document for LA PIZZARRIA LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 810A00015057

### **COVER LETTER**

SUBJECT: _	. 7	LA PIZZARRIA LLC	
•		Name of Limited Liability Company	_
		ited Liability Company for Authorization to Transact Business ster the above referenced foreign limited liability company to tr	
Please return all	correspondence concerning	g this matter to the following:	
	· ·	STEVEN LEVY Name of Person	
		Name of Person	
		HOTEMAN, LEVY, BENGIO & Co., PL	<i>;</i> .*
		Firm/Company	2010 JU SECRI
	232	No Hollywoon Eup. Address	
		Address	TARY O
	Yloo	City/State and Zip Code	
		City/State and Zip Code	STATE LORIDA
	E-mail ac	LEVY@HLBCCPA. Com  ddress: (to be used for future annual report notification)	<u>D</u>
For further info	mation concerning this mat	·	
		•	
<del></del>	Name of Person	Area Code & Daytime Telephone Number	225
<u>MAIL</u> Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations attion Section ox 6327 ssee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a	check for the following	g amount:	
X \$125			ling Fee, Certificate us & Certified Copy

## . APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	TH SECTION 608303, FLOR DMPANYTOTRANSACT BUSI			BMITED TO R	EGISTER .	A FORE
1. (Name of Forei	ign Limited Liability Compar	PIZZARA	ZIA LLC			
(Name of Fore)	да ваписа глаотну Сотра	iy, must include 1.m	ппец главину Сотра	y, 6.6.C., 01	LLC. )	
(If name unavailable, of consent of the manage Company," "L.L.C," "	enter alternate name adopted irs or managing members ado LLC.")	for the purpose of tra pting the alternate na	insacting business in I ime. The alternate nan	Florida and attact ne must include	1 a copy of Limited L	t the writt liability
2. De (Jurisdiction under to company is organize	LAWARE the law of which foreign limited)	3	27-3 (FEI numbe	2/9929/		<u>-</u>
	3/23//0 e of Organization)	5. (Di	Jerge Juration: Year limited I	TVAL iability company	will cease	<del>e</del> 10
6	(Date first transacted b	6/1/10	st of perpetual /		IAT IS	(Ca.)
·	(See sections 608.501 &	608.502 F.S. to dete	rmine penalty liability	′)	至高	
7	<u>5650</u>	# STI	RUM ROAD		SSE	_္ပ
	Houy	WOOD Fr	33021-15	3	<del>ن نان .</del> ناری	<u> </u>
8. If limited liabili	ty company is a manage	r-managed compa	ipal Office)  uny, check here		DRIDA	2: 05
9. The name and u	sual business addresses	of the managing i	nembers or manag	gers are as foll	ows:	
ANDRES	HERNANDEZ-	5650 51	RUM ROAD	HOLLYWOO	o E	<u>33</u> 01/
				,		
			· · · · · ·			
the jurisdiction under th	nal certificate of existence, no r he law of which it is organized. cate under oath of the translator	(A photocopy is not a	duly authenticated by eceptable. If the certifi	the official having cate is in a foreig	g custody o n language	of records 2, a
<ol> <li>Nature of busing</li> </ol>	ness or purposes to be co	onducted or prome	oted in Florida:	A Pi	2ZA	
_ Stone		F	<u></u>			
	1	D				<b></b>
	Signature of a semb (In accordance with section an affirmation under the pe	608,408(3), F.S., the e	secution of this docume	nt constitutes		
	Anches	Herner or begins man		, ir ite )		
	Typec	or printed name	of signee			

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
LA PIZZARRIA LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:	2810 JI SECR	est to the second
ANORES HERMANDEZ (Name)	2010 JUN 30 PM 2: 05 SECRETARY OF STATE TALLAHASSEE, FLORID	AT ANY MANAGEMENT AND AND ANY MANAGEMENT AND
S650 SARLING ROAP Florida Street Address (P.O. Box NOT ACCEPTABLE)	PH 2: 05 OF STATE E, FLORIDA	STATE OF STA
Hollywoop FL 3302/ 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 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LA PIZZARRIA LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE TWENTY-SECOND DAY OF JUNE, A.D. 2010.

4802470 8300

100680880

AUTHENTY CATION: 8070990

DATE: 06-22-10

You may verify this certificate online at corp.delaware.gov/authver.shtml