



202565416094



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**ARTICLES OF ORGANIZATION**  
**CA LIMITED LIABILITY COMPANY**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

File No.: 202565416094

Date Filed: 1/20/2025

B3371-5378 01/20/2025 8:47 PM Received by California Secretary of State

|   |  |
|---|--|
| Limited Liability Company Name  |  |
| Limited Liability Company Name  | Mi Encanto Restaurant & Lounge LLC   |
| Initial Street Address of Principal Office of LLC   |  |
| Principal Address   | 539 PARK BLVD<br>ORANGE COVE, CA 93646   |
| Initial Mailing Address of LLC  |  |
| Mailing Address   | 539 PARK BLVD<br>ORANGE COVE, CA 93646   |
| Attention   |  |
| Agent for Service of Process  |  |
| Agent Name  | Alma B Molinar Gutierrez   |
| Agent Address   | 539 PARK BLVD<br>ORANGE COVE, CA 93646   |
| Purpose Statement   | The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act. |
| Management Structure  |  |
| The LLC will be managed by  | One Manager  |
| Additional information and signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this filing.   |  |
| Electronic Signature  |  |
| <input checked="" type="checkbox"/> By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign. |  |
| <i>Alma Blanca Molinar Gutierrez</i>  | <i>01/20/2025</i>  |
| Organizer Signature   | Date   |