

L11000036410

Florida 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.

(((H11000079537 3)))



H110000795373ABC0

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)617-6383

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
GARCIA & HERNANDEZ ASSOCIATES, LLC**

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

RECEIVED
11 MAR 25 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
11 MAR 25 AM 7:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

MAR 28 2011

EXAMINER

H 1 1 0 0 0 0 7 9 5 3 7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name: The name of the Limited Liability Company is:

Garcia & Hernandez Associates, LLC

ARTICLE II – Address:

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

Principal Office Address:

2071 NW 112th Avenue,
Miami, FL, 33172.

Mailing Address:

2071 NW 112th Avenue,
Miami, FL, 33172

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

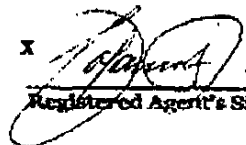
The name and the Florida street address of the registered agent are:

Colombia Mercedes Hernandez

2071 NW 112th Avenue
Miami, FL 33172.

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, F.S.

Colombia Mercedes Hernandez

x 
Registered Agent's Signature

FILED
11 MAR 25 AM 7:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H 1 1 0 0 0 0 7 9 5 3 7

H 1 1 0 0 0 0 7 9 5 3 7

ARTICLE IV – Manager(s) or Managing Member(s):

The name of each Manager or Managing Member is as follows:

Title:

Name and Address:

MGRM

ANISABEL GARCIA

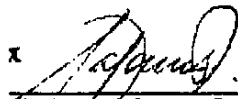
MGRM

COLOMBIA MERCEDES HERNANDEZ

MGRM

VICTOR MANUEL GARCIA

REQUIRED SIGNATURE:

x 

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

COLOMBIA MERCEDES HERNANDEZ

Typed or printed name of signer

FILED
SECURITY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 25 AM 7:56

H 1 1 0 0 0 0 7 9 5 3 7