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2012 JAN 27 AH 8: 42 SECRETARY OF STATE FALLAHASSEE, FI ORIGA

J. SAULSBERRY EXAMINER JAN 2 7 2012

# **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
SUBJECT: Albo	Construction Llc		,
30 <b>b</b> 0be1.	<del></del>	ed Liability Company	
•			
The enclosed Article	s of Organization and fee(s) are s	submitted for filing.	
Please return all corr	espondence concerning this matt	er to the following:	
Raul F.	Albo		
		Name of Person	,
ALBO (	Construction Llc		
	······································	Firm/Company	
7018 D	anewood Ct		
,		Address	
Tampa.F	1.33615		
:	•	y/State and Zip Code	7A 28
albo_raul	@yahoo.com	or future annual report notification)	12 J
		•	2012 JAN 27 SECKETARY ALL AHASSE
For further informati	on concerning this matter, please	call:	rn
Raul F. ALBO		at (727 ) 410-4794	AR AR
Na	me of Person	Area Code & Daytime Telepho	
Enclosed is a check	k for the following amount:		
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Com	pany is:			
ALBO CONSTRUCTION	LLC			
	ited Liability Company, "L.L.C.," or "LLC.")	<del></del>		
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Lia	bility Co	mpan	y is:
Principal Office Address:	Mailing Address:			
Came &	7018 Danewood Ct Tampa Fl. 7018 Danewood Ct Tampa Fl.		•	,
business entity with an active Florida registration.)  The name and the Florida street address  Raul F. Albo	of the registered agent are:	SECRETARÝ OF ALLAHASSEE,	DI2 JAN 27 AM	
7018 Danewoo	od Ct Tampa Fl. 33615	073 71.S		₩ <b>-</b> # ^-,,
Florida	street address (P.O. Box NOT acceptable)	NID/	8: 42	
	FL City, State, and Zip			
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com	and to accept service of process for the acted in this certificate, I hereby accept the capacity. I further agree to comply with taplete performance of my duties, and I am asfregistered agent as provided for in Chi	appointn he provis familiar	nent a sions o with a	s of all ind

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

### ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGR	Raul F. Albo	
	7018 Danewood Ct Tampa Fl. 33615	
MGRM	Juana A. Albo	
<u></u>	7018 Danewood Ct Tampa Fl. 33615	
MGRM	Yosbany Marquez	5
	8214 N. Lois Ave, Tampa, Fl.33614	;; ;; ;;
	338	
	( f ) <del></del>	ž
•		χ. •
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·	
CLE V: Effective date, if other than	the date of filing (OPTIONAL)	AL)
effective date is listed, the date mus 00 days after the date of filing.)	st be specific and cannot be more than five business day	ys p
REQUIRED SIGNATURE:	Faul	
	<del></del>	

(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. 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.)

Raul F. Albo

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)