## L13000062060

(Reques	stor's Name)
(Addres	s)
(Addres	s)
(City/Sta	ate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine:	ss Entity Name)
,	
(Docum	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	g Officer:
•	
	APR 2 9 2013
	A. LUNT
	W13-18812

Office Use Only



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APR 24 M = 20
SECRETARY OF STATE
ASSEE, FLORIDA

03/27/13--01013--009 \*\*130.00



April 1, 2013

JESUS A. SOTO 11040 NW 2ND AVE. MIAMI SHORES, FL 33168

SUBJECT: JESUS SOTO, LLC Ref. Number: W13000018812

We have received your document for JESUS SOTO, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 513A00007635

## **COVER LETTER**

TO:		ration S on of Co	ection rporations				
CUDIE		ESUS	SOTO, LLC				
SUBJE	:C1:		Name of Limit	ed Liability Cor	npany		-
The end	closed Ar	ticles o	f Organization and fee(s) are	submitted for fil	ing.		
Please	return all	corresp	ondence concerning this mat	ter to the followi	ing:		
	JESUS	SASC	ОТО				
			,	Name of Person			
				Firm/Common		····	<del> </del>
	11040	NW 2	ND AVENUE	Firm/Company			
•				Address		<del></del>	
	MIAMI	SHO	RES FL 33168			<b>Z</b> S	2013
	jesusso	oto159	Cit 94@gmail.com	y/State and Zip C	ode	CHE TA	APR :
For first	han infa-	matian.	E-mail address: (to be used		eport notification)	338.7 0F	
	Soto	mation (	concerning this matter, please	786	262 2118	F STATE FLORIDA	# 20
		Name	of Person	_ at ( Area Co	ode & Daytime Telep		. •
Enclos	ed is a c	heck fo	or the following amount:				
⊒\$125.	00 Filing	g Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fi Certified (	_	\$160.00 Filing I Certificate of St Certified Copy (additional copy is	atus &
			Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisio Cliftor 2661 I	/Courier Address ration Section on of Corporations n Building Executive Center C assee, FL 32301		

JESUS SOTO,	LLC							
(1	Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")		_				
ARTICLE II - A	Address:							
		s of the principal office of the Limited L	_iability	Comp	any is:			
Principal Office Address:		Mailing Address:	Mailing Address:					
11040 NW 2nd Ave		11040 NW 2nd Ave						
Miami Shores,		Miami Shores, FL 33168	·					
Miami Shores,	FL 33168	Miami Shores, FL 33168		  				
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, F Company cannot serve as in active Florida registration	Miami Shores, FL 33168  Registered Office, & Registered Agent s own Registered Agent. You must designate an indi	e's Signa Secretary FALLAHASS		Tą			
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, F Company cannot serve as in active Florida registration Florida street addre	Miami Shores, FL 33168  Registered Office, & Registered Agent s own Registered Agent. You must designate an indi .)  ss of the registered agent are:  Name	e's Signa Secretary FALLAHASS	2013 APR 24	FILE			
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, F Company cannot serve as it in active Florida registration e Florida street addre Jesus Soto  11040 NW 2nd A	Miami Shores, FL 33168  Registered Office, & Registered Agent s own Registered Agent. You must designate an indi .)  ss of the registered agent are:  Name	e's Signa Secretary FALLAHASS	nother 2013 APR 24 PM	FILED			
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, F Company cannot serve as it in active Florida registration e Florida street addre Jesus Soto  11040 NW 2nd A	Miami Shores, FL 33168  Registered Office, & Registered Agent s own Registered Agent. You must designate an indi .)  ss of the registered agent are:  Name  Ave da street address (P.O. Box NOT acceptable)	P's Signa ividual or an	2013 APR 24	FILED			

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

<del></del>	Jesus Soto 11040 NW 2nd Ave Miami Shores FL 33168
MGRM	Julio Soto
	Miami Shores FL 33168
	Te S
	HAGE A
<del></del> -	——————————————————————————————————————
Use attachment if necessary)	STATE LORHO
	e date of filing: (OPTIO

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. 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.)

**Jesus Soto** 

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)