

3/24/2021

Division of Corporations

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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.

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : PEREZ ARCHE AN ACCOUNTING & TAX SERVICES INC
Account Number : 120070000033
Phone : (305)649-7040
Fax Number : (305)643-3237

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

Email Address: Araicaisabel@gmail.com

FLORIDA LIMITED LIABILITY CO.
CENTENO J. LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

FILED
21 MAY 24 PM 6:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY 24 PM 2:18

3/25/21

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CENTENO J. LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:8915 SW 223rd TERR
CUTTLER BAY, FL 33190Mailing Address:8915 SW 223rd TERR
CUTTLER BAY, FL 33190

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JOUSSELIETT M. CENTENO

Name

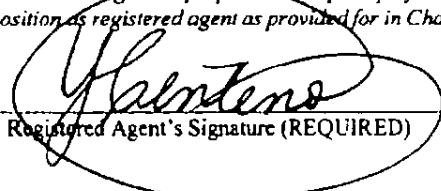
8915 SW 223rd TERRFlorida street address (P.O. Box **NOT** acceptable)CUTTLER BAY FL 33190

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 605, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CENTENO J. LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANA ISABRI ARAICA

Name of Person

PEREZ ARCHE ACCOUNTING TAX SERVICES

Firm/Company

4011 W. FLAGLER ST STE 501

Address

CORAL GABLES, FL 33135

City/State and Zip Code

ARAICAISABEL@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOUSSELIETT M. CENTENO 305 244-6184

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL 32303

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