To:

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone

: (305)444-4994

Fax Number

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\*\*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. SERVICES FER LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

To:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: SERVICES FER 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: Mailing Address: 264 BEACOM BLVD MIAMI, FL 33135 SAME 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 emity with an active Florida registration.)

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

DOWNTOWN ACC	<b>COUNTING MIAMI</b>	
	Name	
255 EAST FLAGLE	R ST STE 101	
Florida street addre	ss (P.O. Box <u>NOT</u> as	rceptable)
MIAMI	FL	33131
City	State	Zip

Having been named us 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 portifion as registered orgent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

To:

	Title: "AMBR" # Authorized Member	Name and Address:		
	"MGR" = Manager			
	AMBR	FERNANDO JOSE OBANDO BRIZUELA		
		264 BEACOM BLVD. MIAMI, FL 33135		
••	4			
	(Use attachment if necessary)			
	••			
ARTIC:	LEV: Effective date, if other than the di	are of filing:		
the date	of filing.)	specific and cannot be more than five business days prior to or 90 days aft		
Note:	If the date inserted in this block does no	at meet the applicable stanutory filing requirements, this date will not be listed		
the doc	ument's effective date on the Departme	nt of State's records.		
ARTIC	LE VI: Other provisions, if any			
		-		
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	REQUIRED SIGNATURE:	()		
	A Section of the sect	<u>/</u>		
	Signature of a	member or an authorized representative of a member.		
	This document is exer	cuted in accordance with section 605.0203 (1) (b). Florida Statutes.		
	i am aware that any fa	lse information submitted in a document to the Department of State ree felony as provided for in s.817,155, F.S.		
	constitutes a still deg	the felony as provided for in s.a.) 7,155, F.S.		
	FERNANDO.	IOSE OBANDO BRIZUELA		
		Typed or primed name of signee		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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