

L23000877022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

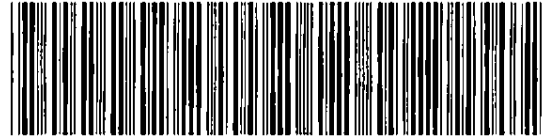
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 JUL 10 PM 1:39

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Handwritten mark

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Contecasa 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:

Marlyn Claudia Mejia Martinez
Name of Person
Luxor Engineering & Remodeling Corp.
Firm/Company
12000 N Dale Mabry Highway Suite 264
Address
Tampa, FL 33618
City/State and Zip Code
info@luxorgroupus.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marlyn Claudia Mejia Martinez 813 593-0611
Name of Person at (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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Contecasa 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:

16703 Early Riser Ave, Ste 213
Land O Lakes, FL 34638

16703 Early Riser Ave, Ste 213
Land O Lakes, FL 34638

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:

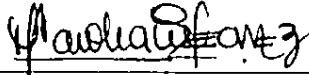
Luxor Engineering & Remodeling Corp
Name

12000 N Dale Mabry Highway Suite 264

Florida street address (P.O. Box NOT acceptable)

<u>Tampa</u>	<u>FL</u>	<u>33618</u>
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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Secy of State
TALLAHASSEE, FL 09111

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Luxor Engineering & Remodeling Corp
12000 N Dale Mabry Highway Ste 264
Tampa, FL 33618

AMBR

Golden House Investing Group LLC
4268 Goldecoast Ave
Spring Hill, FL 34609

AMBR

Concuality LLC
3643 Cuernavaca Ct
Largo, FL 33771

AMBR

ETEM Investment Solutions LLC
8312 Fountain Ave
Tampa, FL 33615

(Use attachment if necessary)

See attachment

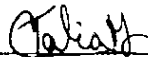
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Talea Cruz for Etem Investment Solutions
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)

ADDITIONAL AUTHORIZED MEMBERS FOR CONTECASA LLC

AMBR

Creations & Properties LLC

8713 Waterway Drive

Tampa, FL 33635

AMBR

Bluewave Real Opportunity LLC

8713 Waterway Drive

Tampa, FL 33635

AMBR

Ruizintellinvest LLC

6413 Eldorado Dr

Tampa, FL 33615

AMBR

Gabanainv Corp

2094 Apalachicola LN

Sanford, FL 32771