

To: 18506176381

7/23/20, 12:04 PM

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10/10/2016 11:14 AM

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From: 16075972631

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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 : NJ ACCOUNTING SERVICES CORP
Account Number : I20240000034
Phone : (305)686-2850
Fax Number : (844)587-9637

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

Email Address: njtaxservices22@gmail.com

FLORIDA LIMITED LIABILITY CO. LA 8VA VILLA RESTAURANT LLC

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

2025 JUL 23 PM 1:50

2025 JUL 23 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LA 8VA VILLA RESTAURANT 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:

GEOSVANY GONZALEZ VALDES

Name of Person

LA 8VA VILLA RESTAURANT LLC

Firm/Company

564 HIALEAH DR

Address

HIALEAH, FL 33010

City/State and Zip Code

NJTAXSERVICES22@GMAIL.COM

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

For further information concerning this matter, please call:

JESUS O CANTO MORALES

305

686-2850

at ()

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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SEC. OF STATE
TALLAHASSEE, FL

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LA 8VA VILLA RESTAURANT 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:564 HIALEAH DR
HIALEAH, FL 33010**Mailing Address:**564 HIALEAH DR
HIALEAH, FL 33010**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:

GEOSVANY GONZALEZ VALDES

Name

564 HIALEAH DRFlorida street address (P.O. Box **NOT** acceptable)HIALEAH

City

FL

State

33010

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.

Geosvany Gonzalez
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FL