

L09000048528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

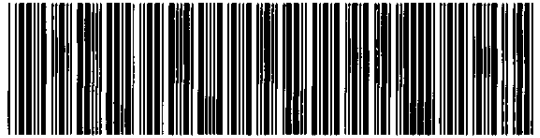
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200155927422

05/18/09--01034--025 **130.00

FILED
09 MAY 18 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 19 2009

EXAMINER

Juan C Garcia
16691 SW 52 Ln.
Miami, Fl. 33185

May 4, 2009

Secretary of State
Division of Corporation
PO BOX 6327
Tallahassee, Fl. 32314

FILED
09 MAY 18 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Gentlemen:

Enclosed please find the Articles of Incorporation for Genesis Universal Builders, LLC., together with my check in the amount of \$130.00 to cover for your filing fees.

Should you have any questions concerning the above, please do not hesitate to contact me.

Sincerely,

Juan C. Garcia

/Jcg

Encls.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY

ARTICLE I-NAME:

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

GENESIS UNIVERSAL BUILDERS, LLC

ARTICLE II-ADDRESS:

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL
OFFICE OF THE LIMITED LIABILITY COMPANY IS:

16691 SW 52 LN
MIAMI, FLORIDA 33185

ARTICLE III-REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S SIGNATURE:

THE NAME AND THE FLORIDA STREET ADDRESS OF THE REGISTERED
AGENT IS:

JUAN CARLOS GARCIA
NAME

16691 SW 52 LN
FLORIDA STREET ADDRESS

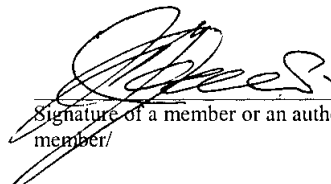
MIAMI, FLORIDA 33185
CITY, STATE

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 PROVIDED FOR IN CHAPTER 608, F.S.


Registered Agent's Signature

ARTICLE IV-MANAGEMENT (Check box if applicable)

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY ONE
MANAGER AND IS THEREFORE, A MANAGE-TRIMANAGED
COMPANY.


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.)

JUAN CARLOS GARCIA
Typed or printed name of signee

FILED
09 MAY 18 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA