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FLORIDA LIMITED LIABILITY CO. 13715 LAKES, LLC

Certificate of Status	1
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Page Count	03
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B. KOHR

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ATTICLES OF CHOMILENTION FOR PLOMON BUILTED ELABILITY COMMAND	
ARTICLE I - Name:	_
The name of the Limited Liability Company is:	
	A CONTRACTOR OF THE PARTY OF TH
13715 LAKES, LLC	
ARTICLE I - Name: The name of the Limited Liability Company is: /37/5 / AKES / LLC (Must end with the words "Limited Liability Company, the abbreviation "L.C." or the designation "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
ARTICLE II - Address:	By V
The mailing address and street address of the principal office of the Limited Liability Company is:	رج 🔑
	`
Principal Office Address: Mailing Address:	35.
2391 5W 139Pl SAME	
410ml, F/ 33175	
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:	
ADRIE! PEREZ	•
ADRIE! PEREZ Name	
239) cm /39 P/	
Z 391 Sac 139 Pl Florida street address (P.O. Box NOT acceptable)	
MIAMI FL 23/2 City, State, and Zip	
City, State, and 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 608, F.S	
Registered Agent's Signature (REQUIRED)	
Registered Agend's pignature (IECOURED)	
/CONTENT (CT)	

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<u>'itle:</u> MGR" = Manager	Name and Address:
MGRM" = Managing Member MGRM MGRM	ADRIBI PEREZ 2391 SW 139 DI MIOMI FI 3317V ANTONIO PEREZ
	4373 C2)/IMS AVB # 905 MIDNI MEMCH, FI 33140
(Use attachment if necessary)	· y
LE V: Effective date, if other than the fective date is listed, the date must	ne date of filing: (OPTIO be specific and cannot be more than five business
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	ne date of filing: (OPTIO

Page 2 of 2

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