

L21000020671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

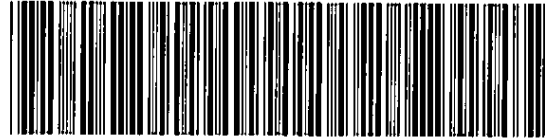
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300358689313

01/22/21 --01032--010 \$135.00

TALLAHASSEE, FL 32302

2021 JAN 22 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2021 JAN 22 AM 10:29

FILED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

24523 SW 110 PL LLC

Signature _____

Requested by: Seth

01/21/21

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

2021 JAN 22 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR

24523 SW 110 PL LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **24523 SW 110 PL LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is **251 VALENCIA AVE., #143096 CORAL GABLES, FL 33114**

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

**The name and address of the initial registered agent is Bauer Gutierrez & Borbon, PLLC, 814
Ponce de Leon Blvd, Suite 210, Coral Gables, FL 33134**

ARTICLE IV: MANAGERS & AUTHORIZED MEMBERS

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

**RAFAEL CABRERA, MANAGER
251 VALENCIA AVE., #143096 CORAL GABLES, FL 33114**

**The undersigned has executed these Articles of Organization for filing purposes this 20th
day of January 2021.**

/S/ Rafael Cabrera

Authorized Representative

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, the mentioned company, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the company is: **24523 SW 110 PL LLC**
2. The name and street address of the registered agent and office is:

Bauer Gutierrez & Borbon, PLLC
814 Ponce de Leon Blvd, Suite 210, Coral Gables, FL 33134

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

/S/ David Bauer

David Bauer for Bauer Gutierrez & Borbon, PLLC

2021 JAN 22 AM 10:29
SECTION 110, STATE
TALLAHASSEE, FL