(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
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(Bu	siness Entity Nar	ne)
(Document Number)		
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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is an original a	and one (1) copy of the Declaration of Trust and a check for:	
FEES:		
Declaration of	Trust \$350.00	
		•
OPTIONAL:		.
Certified Copy	\$ 8.75	Ċ
FROM:	Luis Alberto Llamo Name (Printed or typed)	
	3238 NW 99th St	
	City. State & Zip 786-760-0015/786 Daytime Telephone number	-
	786-760-0015/786	<u> 487 - 8552</u>
	Daytime Telephone number /	



2027 JULY - 9 AM 10: 20

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 16, 2022

LUIS ALBERTO LLAMO 3238 NW 99TH ST MIAMI, FL 33147

SUBJECT: LUIS ALBERTO LLAMO Ref. Number: W22000062779

We have received your document for LUIS ALBERTO LLAMO and your check(s) totaling \$350.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The address of the registered agent is missing. The Trust did not accompany the application. Please make sure there are two(2) trustees.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

Letter Number: 622A00011146

AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE TO FILE OR QUALIFY

Luis Alberto Llamorrust

In accordance with Section 609.02 of the Florida Statutes, pertaining	nu to
Common Law Declarations of Trust, the undersigned, the Chairman	
Board of Trustees of Luis Alterto Llamo	, a
(Name of Trust) Trust hereby affirms in order to file or qu	with.
(State)	
Luis Altesto Llamo in the State of	Florida.
(Name of Trust)	
1. Two or more persons are named in the Trust.	
2. The principal address is 3233 NW 9946	15+
Miani Florida 33147	
•	
3. The registered agent and street address in the State of Florida is:	
3238 NW 99+n St, MIAMI FL	<u>. 331</u> 47
4. Acceptance by the registered agent: Having been named as reginagent to accept service of process for the above named Declaration at the place designated in this affidavit. I hereby accept the apportunity agent and agree to act in this capacity.	on of Trust
(Signature of Registered Agent)	
5. I certify that the attached is a true and correct copy of the Declar Trust under which the association proposes to conduct its busine Florida.	
Manda Millianty Name:	
NOTARY Chairman of the Board of Trustees	
AND USES STATE OF THE PROPERTY	Ċ
Filing Fee: \$350.00 THEREBERY Certified Copy: \$ 8.75 (optional)	**** ****
Vascasii Valiti	
NALDA HERRERA MY COMMISSION # GG 925712	€*** 4-

EXPIRES: January 15, 2024 Bordes Toru Hotary Public Underwriters

DECLARATION OF TRUST

AN IRREVOCABLE TRUST ORGANIZATION

IN WITNESS WHEREOF:

Creator and Trustee execute this contract and declaration in recognition of the delivery and acceptance of the property named herein, and in recognition of the powers and duties imparted to Trustees of this organization. They assent to all the terms and conditions set forth herein, and declare that the effective date of this organizational document is infra.

JURAT

In compliance with Title 28 U.S.C. § 1746(1), and executed WITHOUT THE UNITED STATES, we affirm under the penalties of perjury, and to the laws of the De Jure united States of America, that the foregoing is true, correct, and complete to the best of my belief and informed knowledge. And Further the Deponent Saith Not. I now affix my Signature and Official Seal to the above Document with EXPLICIT RESERVATION OF ALL OUR UNALIENABLE RIGHTS, WITHOUT PREJUDICE TO ANY OF THOSE RIGHTS, in compliance with UCC § 1-308:

This agreement is entered into and executed willingly, knowingly and voluntarily by each party in good faith, and shall endeavor to execute the promises, terms and conditions herein with diligence and in the best interest of the other party this January 28, 2021 A D.

Executed at the following address: 6868 NW 179 ST #205, HIALEAH, FL, 33015

Signature of the First Trustee:

Luis-Alberto:Llamo

Party ID: ed94a1db-d37e-4d00-ae2b-f3c125647944

IP Address: 99.155.234.211 Security Level: E-mail Digital Signature:

Multi-Factor

Digital Fingerprint Checksum

582ddb7a3172c183f56d94a6caf917

Signature of the Second Trustee:

BELKIS D LLAMO

Party ID: 431e87fb-1805-44ra-95c7-31cbf7a79641

IP Address: 172,58,12,234 Security Level: E-mail Digital Signature:

12/1

Multi-Factor

Digital Fingerprint Checksum

3857e8106becf867d42eb5061c45f1

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Declaration of Trust Page 6 of 6 12241967-LAL-DoT

MINUTES OF THE TRUSTEE MEETING OF

LUIS ALBERTO LLAMO (Name of Trist)

Date: January 28, 2021

THE FIRST TRUSTEE, Luis-Alberto: Llamo, of the aforementioned Trust, was present and constituted a quorum of the Board.

Trustee called the meeting to order and affirmed that officially on this date two fiduciaries will be appointed for directive in handling trust business per written directives as necessary. The fiduciaries are named as follows:

Steven Mnuchin, et al D.B.A.
SECRETARY OF TREASURY
1500 PENNSYLVANIA AVENUE, NORTH WEST
WASHINGTON, DISTRICT OF COLUMBIA 20220

FRANCISCO ALICEA, et al D.B.A. SECRETARY OF TREASURY C/O DEPARTMENT DE HACIENDA, P.O. BOX 9024140 SAN JUAN, PUERTO RICO 00902-4140

If appointment of fiduciaries is not accepted a quorum of the board will reconvene to reelect fiduciary agents as necessary.

There being no more business before the Board, the meeting was adjourned.

Place of Meeting: 6868 NW 179 ST #205, HIALEAH, FL, 33015

Signature of the First Trustee:

Luis-Alberto-Liamo

Pamy ID: ed94a3db-d37e-4d00-ae2b-t3c125647944

IP Address: 99.155.234.211

Security Level, E-mail

Digital Signature:

Multi-Factor

Digital Fingerprint Checksum

582ddb7a3172c183f56d94a6caf917

Signature of the Second Trustee:

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BELKIS DILLAMO

Party ID: 431e87fb-1805-44fa-95c7-31cbf7a79641

IP Address: 172.58 12.234 Security Level: E-mail Digital Signature:

Multi-Factor

Digital Fingerprint Checksum

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