

LO2000004877

Transmittal Letter

Department of State
Division of Corporations
P.O Box 6327
Tallahassee, FL 33314

2/25

MM

Subject: CUZA ENTERPRISES L.L.C
(Proposed limited liability company name-must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00 Filing fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 8.75 Certified Copy

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-02/25/02--01102--001
***155.00 ***155.00

FROM: Kim Suarez

Name

7603 Tamarind Avenue

Address

Tampa, FL, 33625

City, State & Zip

(813)-5057815

Daytime Telephone number

FILED
02 FEB 25 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CUZA Enterprises L. L. C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

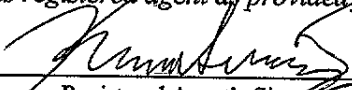
7603 Tamarind Avenue, Tampa, FL, 33625

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Kim Suarez
Name
7603 Tamarind Avenue
Florida street address (P.O. Box **NOT** acceptable)
Tampa FL 33625
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

Article IV - Management (Check box if applicable.)

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


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.)

Kim Suarez
Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA