



# The CAP Financial Solutions, LLC.

10251 West Sample Road, Suite D, Coral Springs, FL 33065

Phone (954) 510-0545 Fax (954) 510-0565

Cesar A. Perez

**FILED**  
03 MAY -2 AM 10: 29  
TALLAHASSEE, FLORIDA



Fax 954 510 0565

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

THE CAP FINANCIAL SOLUTIONS, LLC

**ARTICLE II - Address:**

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

10251 W. SAMPLE ROAD, SUITE D  
CORAL SPRINGS, FL 33065

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

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

CESAR ALEJANDRO PEREZ  
Name

5354 N.W. 49TH STREET  
Florida street address (P.O. Box **NOT** acceptable)

COLOMUT CREEK FL 33073  
City, State, and Zip

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*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.*

[Signature]  
Registered Agent's Signature

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

[Signature]  
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.)

CLAUDIA A. PEREZ  
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)