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Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

centralized business services, l.l.c.

Certificate of Status	0
Certified Copy	0
Page Count	04
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DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION FOR
Centralized Business Services, L.L.C.**

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ARTICLE I - Name:

The name of the Limited Liability Company is:

Centralized Business Services, L.L.C.

ARTICLE II Address:

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

999 N. Krome Avenue
Homestead, Florida 33030

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - Management:

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and addressee(s) of such manager(s) who is/are to serve as manager(s) is/are:

Ricardo Marcos
999 N. Krome Avenue
Homestead, Florida 33030

☐ The Limited Liability Company is to be managed by the member and the name and addresses of the managing member is::

THIS DOCUMENT PREPARED BY:
Howard E. Kurzweil, Esq.
Howard E. Kurzweil, P.A.
2600 Douglas Road, Suite 501
Coral Gables, Florida 33134
Florida Bar No. 284416
Phone: (305) 442-7085

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V Registered Agent and Initial Registered Office

The Registered Agent and the street address of the initial Registered Office of this Corporation in the State of Florida shall be:

HOWARD E. KURZWEIL, ESQ.
HOWARD E. KURZWEIL, P.A.
2600 Douglas Road, Suite 501
Coral Gables, Florida 33134

The Manager and/or Member may, from time to time, move the Registered Office to any other address in the State of Florida.

ARTICLE VI Capitalization

The initial contribution of its member has a value of \$100.00, and no additional capital contributions shall be required at the request of a non-member third party.

IN WITNESS WHEREOF, the undersigned, as an authorized Representative of the Initial Member, has executed the foregoing Articles of Organization as of the 22nd day of September, 2003.


Howard E. Kurzweil, Esq.

STATE OF FLORIDA)
) SS.
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 22nd day of September, 2003, by Howard E. Kurzweil, Esq. who personally appeared before me at the time of notarization, and who is personally known to me ~~or who provided~~ _____ as identification.

NOTARY PUBLIC:

Sign 

State of Florida at Large

My commission expires:

Commission No. _____



Denise V. Powers
My Commission DD157080
Expires November 20, 2006

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TOTAL P.04

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the Registered Office/Agent, in the State of Florida.

That **Centralized Business Services, L.L.C.**, desiring to organize under the laws of the State of Florida, with its registered office at 999 N. Krome Avenue, Homestead, Florida 33030, has named Howard E. Kurzweil, Esq., located at Howard E. Kurzweil, P.A., 2600 Douglas Road, Suite 501, Coral Gables, Florida 33134, as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

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.


Howard E. Kurzweil, Esq.

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TALLAHASSEE, FLORIDA

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