

L040000018693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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03/11/04--01003--004 **25.00

02/17/04--01012--001 **100.00

FILED
2004 MAR 10 PM 3:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W04-7823
J. BRYAN FEB 25 2004

J. BRYAN MAR 11 2004

TRANSMITTAL LETTER

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

FILED
2004 MAR 10 PM 3:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT: Jose Alvarez
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Jose Alvarez
Name (Printed or typed)

104 S. Palm Villas Way
Address

Palm Springs, FL 33401
City, State & Zip

561-856-0222
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 25, 2004

JOSE ALVEREZ
104 S. PALM VILLAS WAY
PALM SPRINGS, FL 33401

SUBJECT: JOSE ALVEREZ LLC
Ref. Number: W04000007823

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for JOSE ALVEREZ LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 204A00012600



ZAHARION'S FLOORING

1338 S. Killian Drive, Suite 11, Lake Park, FL 33403

Tel: 561-848-0454 Fax: 561-848-5778

Minority Business Enterprise

March 2, 2004

I have check on the attached Limited Liability Company and found out that the amount that was submitted was \$25.00 short. Attached you will find the additional check and a copy of the filing please call me if you have any question or need anything further. I can be reached at 5618480454.

Thank you
Becky Zaharion

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jose Alvarez LLC

ARTICLE II - Address:

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

Principal Office Address:

104 S. Palm Villas Way
Palm Springs, FL 33401

Mailing Address:

104 S. Palm Villas Way
Palm Springs, FL 33401

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


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

Jose Alvarez
Name

104 S. Palm Villas Way
Florida street address (P.O. Box **NOT** acceptable)

Palm Springs FLORIDA 33401
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, Florida Statutes..


Registered Agent's Signature

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

mgr

Jose Alvarez
104 S. Palm Villas Way
Palm Springs FL 33401

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

x 

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.)

Jose Alvarez

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)