

L04000049347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600038307956

06/30/04--01005--004 **125.00

FILED

2004 JUN 30 PM 3:22

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN JUL - 1 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DEVOS DEVELOPERS, LLC.
(Name of Limited Liability Company)

FILLED
2004 JUN 30 PM 3:22
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NOE GUCOVSKI
(Name of Person)

PRESIDENT
(Firm/Company)

1662 NE 205 Terrace
(Address)

Miami, Fl. 33179
(City/State and Zip Code)

For further information concerning this matter, please call:

NOE GUCOVSKI at (305) 651 1919
(Name of Person) (Area Code & Daytime Telephone Number)

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

FILLED
2004 JUN 30 PM 3:22
UNIFORM CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

DEVOS DEVELOPERS, LLC.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1662 NE 205 Terrace

Miami, Fl. 33179

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

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

NOE GUCOVSKI

Name

1662 NE 205 Terrace

Florida street address (P.O. Box **NOT** acceptable)

Miami

FLORIDA 33179

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

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:

President - Secretary

NOE GUCOVSKI

Manager MGR

PAUL MATERON

Treasurer

EDUARDO E. SANTOS

(Use attachment if necessary)

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

REQUIRED 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.)

NOE GUCOVSKI

Typed or printed name of signer

FILED
2004 JUN 30 PM 3:22
JAMES H. HARRIS & ASSOCIATES
TALLAHASSEE, FLORIDA