

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone

: (305)599-0839

Fax Number

: (305)716-0346

<u>--</u>

LIMITED LIABILITY COMPANY

CARLOS J. ROQUETA LLC

Certificate of Status	0
Certified Copy	1
Page Count	-923
Estimated Charge	\$155.00

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si. M. Varilyer

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	. ROQUETA LLC	
ARTICLE II - Add the mailing address	iress: and street address of the principal	office of the Limited Liability Con
rincipal Office A	ddress:	Malling Address:
24 SW 62 A	VE	24 SW 62 AVE
MIAMI, FL	33144	MIAMI, FL 33144
	gistered Agent, Registered Office	
	•	
	gistered Agent, Registered Office lorida street address of the registere	
	egistered Agent, Registered Office forida street address of the registere CARLOS J. ROQUETA Name	d agent are:

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..

died Agent's Signature

Page 1 of 2 (CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
HRGM	CARLOS J. ROQUETA 24 SW 62 AVE MIAMI. FL 33144
(Use attachment if necessary)	ARC S
NOTE: An additional article must	t be added if an effective date is requested.
Signature of a flember or of this document constitutes that the facts stated herein a	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.) 05 J. 2000ETA- or printed name of signee