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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 : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone : (305)599-0839

Fax Number : (305)716-0346

LIMITED LIABILITY COMPANY**HECHOS GROUP, LLC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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DIVISION OF CORPORATION
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04 NOV 23 PM 4:45
TALLAHASSEE FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

H04000233738 3

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

HECHOS GROUP, LLC.

Article II - Address:

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

Principal Office Address:

1564 S. Dixie Hwy Suite 113
Coral Gables, Fla. 33146

Mailing Address:

1564 S. Dixie Hwy Suite 113
Coral Gables, Fla. 33146

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

WILFREDO LEON

1564 SOUTH DIXIE HIGHWAY SUITE 113

MIAMI, FLORIDA 33146

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

Page 1 of 2
(CONTINUED)

H04000233738 3

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04 NOV 23 PM 4:45
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ARTICLE IV - Manager(s) or Managing Member(s):

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

WILFREDO LEON
1564 S. Dixie Hwy Suite 113
Coral Gables, Fla. 33146

MGRM

SOBEIRA LEON
1564 S. Dixie Hwy Suite 113
Coral Gables, Fla. 33146



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.)

WILFREDO LEON
Name of Signee