

Electronic Filing Cover Sheet

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Division of Corporations

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## LIMITED LIABILITY COMPANY

## CARRILLO PAINTING, LLC

Certificate of Status	θ
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Estimated Charge	\$125.00

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## 'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name: The name of the Limited Liability Compa	any is:	
CARRILLO PAIN	TING, LLC	
ARTICLE II- Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:	
8414 N. LOIS AV	E., TAMPA, FL 33614	
ARTICLE III Registered Agent, Register The name and the Florida street address of	red Office, & Registered Agent's Signature: of the registered agent are:	
. <u>G</u> L	ADYS CARRILLO	
	Name	
_84	14 N. LOIS AVE,	
	Florida Street Address	
_ <u></u>	MPA, FL 33614	
	City, State and ZIP	
to act in this capacity. I further agree to comcomplete performance of my duties, and I am agent as provided for in Chapter 608, F. S.	ificate, I hereby accept the appointment as registered agent and agree apply with the provisions of all statutes relating to the proper and a familiar with and accept the obligations of my position as registered	
Signature/Registered Age Article IV Management (Check box if app		
The Limited Liability Company is to be manager managed company.	e managed by one manager or more managers and is, therefore, a	
(An additional article	must be added if an effective date is requested)	
Con	also -	
Signature of a member of	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.)		
GLADYS CARRIL	LO	
1	voed or printed name of signee	