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(((H050000470473)))

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: XIOMARA LEE, P.A.

Account Number : 120040000008

Phone

: (305)262-2323

: (305)262-2324

Fax Number	: (305)262-2324		SINIS
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Electronic Filing Menu

Corporate Filing

Public Acces

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3852622324 XIOMARA LEE PA (LH050000470473)

ARTICLES OF ORGANIZATION FOR

A TOTAL TO	
ARTICLE I - Name: The name of the Limited Liability Company	is:
GONZALEZ-MUSIBAY CONSTRUCTORS & LA	ND 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:
2831 EXCHANGE COURT	2831 EXCHANGE COURT
WEST PALM BEACH, FL 33409	WEST FALM BEACH, FL 33409
	·
	ed Office, & Registered Agent's Signature:
The name and the Florida street address of the CARLOS M. GONZAL	e registered agent are:
	e registered agent are:
CARLOS M. GONZAL	e registered agent are: EZ
CARLOS M. GONZAL Nar 2831 EXCHANGE COUR	e registered agent are: EZ
CARLOS M. GONZAL Nar 2831 EXCHANGE COUR	e registered agent are: .EZ nc
CARLOS M. GONZAL Nar 2831 EXCHANGE COUR Florida street address (e registered agent are: EZ nc T P.O. Box NOT acceptable) FLORIDA 33409

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((HO50000470473))

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	CARLOS M. GONZALEZ	
=	2831 EXCHANGE COURT	
	WEST PALM BEACH, FL 33409	
MGRM	JESSIE MERCED-GONZALEZ	
	2831 EXCHANGE COURT	
	WEST PALM BEACH, FL 33409	
MGRM .	LIZETTE GONZALEZ	
	2831 EXCHANGE COURT	
	WEST PALM BEACH, FL 33409	
(Use attachment if necessary)		

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

REQUIRED SIGNATURE:

Signature of a member or 11 author skell representative of a mansker.

(In accordance with action 608, 413(3). Florida Statutos, the execution of this document constitutes an affirmation under the penalties of purpury that the foots scaled bearing the true.

CARLOS M. GONZALEZ

'yped or printed name of signee

\$ 25.00 Designation of Registered Agent

5 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

Page 2 of 2