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(Requestor's Name)
·
(Address)
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(1233)
(O) (O) (O) (O) (O) (O) (O)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2-2-4,11-2-2),
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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SECURISHED AT STATE
TALLASSASSES FLORIDA

## TRANSMITTAL LETTER

TO: Registration Division of	Section Corporations	•	• •
SUBJECT:	Sandoval Serv	ices L.L.C.	, <del></del>
	(Name of Limited	d Liability Company)	-
	s of Organization and fee(s) are so		
		se L. Sandoval	
<u> </u>		Name of Person)	
		·	
		val Services L.L.C.	<del>.</del>
	(.	Firm/Company)	
	4031	N.W. 8th Terrace	
		(Address)	
	Ft. Lau	uderdale, FL 33309	
<u></u>		State and Zip Code)	
For further informati	on concerning this matter, please	call:	ę.
	. Sandoval	754 366 4280	05 M
	ime of Person)	at (	elephone Number)
`	,	(	cicpione Walling 1
Enclosed is a check	x for the following amount:		西西
<b>7</b> \$125.00 Filing Fo	ee	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:		MAILING A	DDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sandoval Services L.L.C.			
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
4031 N.W. 8th Terrace	4031 N.W. 8th Terrace		
Ft. Lauderdale, FL 33309	Ft. Lauderdale, FL 33309		
The name and the Florida street addres  Jo	s of the registered agent are: se L. Sandoval Name		
403	4031 NW 8th Terrace		
	Florida street address (P.O. Box NOT acceptable)		
Ft Lau	Ft Lauderdale, FLF23309		
C	ity, State, and Zip		
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con	nt and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as scapacity. I further agree to comply with the provistors of all implete performance of my duties, and I am familiar with and in as registered agent as provided for in Chapter 608, F.S.		

(CONTINUED)

SANdOVAL

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	Jose L. Sandoval				
	4031 NW. 8th Terrace				
	Ft. Lauderdale, FL 33309				
MGRM	Rene Hernandez				
	340 NW 51 Court				
	Ft. Lauderdale, FL 33334				
MGRM	Julio Oliveta				
	130 NE 41 Street # 5				
	Fort Lauderdale, FL 33334				
(Use attachment if necessary)					
NOTE: An additional article must be	added if an effective date is requested.				
REQUIRED SIGNATURE:	—				
JOSE-1. SANdOVAI.					
Signature of a member or an authorized representative of a member.					
	n 608.408(3), Florida Statutes, the execution Assets an affirmation under the penalties of perjury in are true.)				
Jos	se L. Sandoval				
Typed or printed name of signee					
Filing Fees:	ation and Designation				
\$125.00 Filing Fee for Articles of Organiza	ation and Designation				
of Registered Agent	A				
\$ 30.00 Certified Copy (Optional)	Fire to the control of the control o				
\$ 5.00 Certificate of Status (Optional)	•				