

L 05000038454

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000096234 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
05 APR 19 PM 2:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED
05 APR 19 PM 12:39
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

creative consulting of florida, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

31

13
H05 000096234

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CREATIVE CONSULTING OF FLORIDA, LLC

ARTICLE II - Address:

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

Principal Office Address:

1781b West 32nd Place
Hialeah, FL 33012

Mailing Address:

1843 Brickell Avenue, #1702
Miami, FL 33129

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

The name and the Florida street address of the registered agent are:

Yvonne Alvarez
Name

1643 Brickell Avenue, #1702

Florida street address (P.O. Box NOT acceptable)

Miami, FL 33129
City, State, and Zip

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, F.S.


Registered Agent's Signature

(CONTINUED)

Page 1 of 2

H05 000096234

FILED
05 APR 19 PM 2:17
TALLAHASSEE FLORIDA
SECRETARY OF STATE

H05000096234

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMYvonne Alvaroz1843 Brickell Avenue, #1702Miami, FL 33129MGRIndustrias Omega (Esteban Alvaroz)Panamericana Sur Km 7 1/2, Sector GuajatoQuito - Ecuador

(Use attachment if necessary)

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

REQUIRED SIGNATURE:
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.)

YVONNE ALVAREZ
Typed or printed name of signer**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

H05000096234

FILED
05 APR 19 PM 2:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA