# L05000114519

## 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.

(((H05000275011 3)))

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

Division of Corporations

Fax Number : (850)205-0383

To:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634-3694

: (305)633-9696 Fax Number

## LIMITED LIABILITY COMPANY

### party for kids llc

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

Name Availability Document Examiner

EUC 

Updater Electronic Filing, Menu. Historia er CC Verifyer

DCC Ackno Jodgement DUC Comparate Filing

Rublic Access Help

TP:ZT S002-05-00N

W. P. Verifyer

## ARTICLES OF ORGANIZATION OF A FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I-NAME

The name of the Limited Liability Company is:

#### PARTY FOR KIDS LLC

#### ARTICLE II-ADDRESS:

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

#### PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

5498 NW 94<sup>TH</sup> TERRACE SUNRISE FILA 35351

5498 NW 94<sup>18</sup> TERRACE SUNRISE PLA 33351

ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE. The name and the Florida street address of the registered agent are:

## YUMELY ORTIZ

5498 NW 94<sup>TH</sup> TERRACE FLORIDA STREET ADDRESS (P.O.BOX NOT ALCEPTABLES

> SUNRISE FLA 33351 CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HERBEY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY: FURTHERAGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFONANCE OF MY DUTIES, AND I AM TAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 608, F.S.

HOS000275011

Z0.4

## HUS000075011

## ARTICLE IV-MANAGEMENT/MEMBER(5). The name(s) and address (es) of each Manager or Managing Member is as follows:

Title;

Name and address:

MGR= Manager MGRM= Managing Member

MGR=YUMELY ORTIZ, 5498 NW 94TH TERRACE SUNRISE FLA 33351

MGR=PEDRO ONDARROA, 5498 NW 94<sup>TR</sup> TERRACI: SUNRISE FLA 33351

(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 vection 608.408(3). Florids Statutes, the execution of this document constitutes an affirmation under the populties of perjury that the facts stated berein are true.

YUMELY OR'ILZ
Typed or printed name of signed

HOSOCOSOH