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.

(((H05000275606 3)))

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

To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : ACCOUNTING & BEYOND

Account Number : I19990000223 : (813)998-9800 Fax Number : (813)935~9982

LIMITED LIABILITY COMPANY

PHONES 4 ALL OF TAMPA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing

Public Access Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:	•	7 <u>8</u> 25
PHONES 4 ALL OF TAMPA, LLC		RC RC
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "U.C." or "L.C.,")	- 1
ADTES D. H. Address.	•	册
The mailing address and street address of the pri	ncinal office of the Limited Liability Cot	noany is:
The maning address and spect address of the pri	nother office of the Diffice Presently on	공류 흐
ARTICLE II - Address: The mailing address and street address of the pri Principal Office Address:	Mailing Address:	於 28
210 S. KING AVENUE	210 S. KING AVENUE	_
UNIT J	UNIT J	•
BRANDON, FL 33510	BRANDON, FL 33510	•
business entity with an active Florida registration.) The name and the Florida street address of the re-	gistered agent are:	
JUAN MOREJON		
Name		
210 S. KINGS AVENUE	, SUITE J	
Florida street addi	ress (P.O. Box <u>NOT</u> acceptable)	
BRANDON, FL 33510	FL	
City, State, as	nd Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis	nis certificate, I hereby accept the appointm I further agree to comply with the provis	vent as ions of all

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

Title:		Name and Address:
"MGR" = Man	ядет	
	anaging Member	
· · · · ·		
MGR		ROBERTO BORRERO, JR.
		210 S. KINGS AVENUE, UNIT J
		BRANDON, FL 33510
		4
		,
		·
		· · · · · · · · · · · · · · · · · · ·
		,
		· · · · · · · · · · · · · · · · · · ·
	···	
Use attachmen	e date, if other than the	e date of filing: (OPTIO
LE V: Effective fective date is li days after the o	e date, if other than the isted, the date must b date of filing.)	e date of filing:
LE V: Effective fective date is l	e date, if other than the isted, the date must b date of filing.)	e date of filing:
LE V: Effective fective date is li days after the	e date, if other than the isted, the date must b date of filing.)	e date of filing:
LE V: Effective fective date is li days after the	e date, if other than the isted, the date must b date of filing.)	e date of filing: (OPTIO be specific and cannot be more than five business
LE V: Effective vective date is lidays after the	e date, if other than the isted, the date must be date of filing.)	be specific and cannot be more than five business
LE V: Effective vective date is lidays after the	e date, if other than the isted, the date must ledate of filing.) IGNATURE: Signature of a memb (In accordance with see of this document cons	per of the authorized representative of a member. Section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
LE V: Effective fective date is lidays after the	s date, if other than the isted, the date must be date of filing.) IGNAPURE: Signature of a memb (In accordance with seef this document constitute that the facts stated	per of an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)
LE V: Effective vective date is lidays after the	s date, if other than the isted, the date must be date of filing.) IGNAPURE: Signature of memb (In accordance with se of this document consthat the facts stated JUAN MOREJON	per of sh authorized representative of a member. Section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)
EV: Effective date is lidays after the case	sted, if other than the isted, the date must be date of filing.) IGNAPURE: Signature of a memb (In accordance with see of this document constitute the facts stated JUAN MOREJON	per of an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)
LE V: Effective date is lidays after the o	sted, the date must had the isted, the date must had the of filing.) IGNATURE: Signature of a memb (In accordance with se of this document constitute the facts stated JUAN MOREJON	per of sh authorized representative of a member. Section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)

Page 2 of 2