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(Re	equestor's Name)	
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☐ PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

Chattahoochee.



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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Torres (on (Name of Limite	Stwc Hon LL	<u>د</u>
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please return all corresp	pondence concerning this matte	er to the following:	
·	Aurelio Ta	n vve s	
	,	Name of Person)	
	Torves	Construction (Firm/Company)	LLC
	- · · · · · · · · · · · · · · · · · · ·	•••	
	30 south oa	(Address) FL 32374 /State and Zip Code)	
	1	(Address)	
_ ch	utta hoochee	IFL 32324	
	(City	State and Zip Code)	
	concerning this matter, please		
4	•		
Avelio -	Torres-Garcia	at (<u>& \$0</u>) <u>663</u> (Area Code & Daytime T	6264
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	m	\mathbf{CI}	Æ	T	 N	am	e	•

The name of the Limited Liability Company is:

Torves (onstwiction 2.L.C.,") (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "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:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

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

Chatta hoochee FL 32324

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..

(CONTINUED) Page 1 of 2

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	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address: Aurelio Torres
	T Mgrna	30 south OUK Ad chattahoochee, F132324
	(Use attachment if necessary)	
(If ar		ne date of filing: <u>() 6 06 17</u> . (OPTIONAL be specific and cannot be more than five business days

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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

Torres - Garcia Typed or printed name of signee