Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694

: (305)633-9696

LORIDA/FOREIGN LIMITED LIABILITY CO.

ezequiel rosas installation services,, ll

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	S:
EZEQUIEL ROSAS INSTALLATION SERVICE	es, LLC
(Must and with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	ن ہ د
The mailing address and street address of the	orincipal office of the Limited Liability Company is:
	Mailing Address:
Principal Office Address:	Mailing Address:
2929 NORTH DIXIE HWY APT 215	2929 NORTH DIXIE HWY APT215
OAKLAND PARK FL 33334	OAKLAND PARK FL 33334
	15 9
	2A 0
ARTICLE III - Registered Agent, Registere	d Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)	stered Agent. You must designate an individual or another
onsiness sumy with an sense ciones resistantour)	
The name and the Florida street address of the	registered agent are:
EZEQUIEL ROSAS BALTA	ZAR
Nam	
	ADTO45
2929 NORTH DIXIE HWY	
rionda succi ac	idress (P.O. Box <u>NOT</u> acceptable)
OAKLAND PARK	FL 33334
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 (REQUIRED)

(CONTINUED) Page 1 of 2

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MUDUM IN IN

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" = Manager	Name and Address:	•
"MGRM" = Managing Member MGRM	EZEQUIEL ROSAS BALTAZAR	
	2929 NORTH DIXIE HWY APT21S	
	OAKLAND PARK FL 33334	-
MGRM	JOSUE BALTAZAR	
	2929 NORTH DIXIE HWY APT 215	
	OAKLAND PARK FL 33334	_
•		
		-
	PV	2 0
	im	
(Use attachment if necessary)	ASSI	() transm
	25 A	OMMIN TE
ARTICLE V: Effective date, if other than the date	of filing: 08/19/06 (OPTIO	CONTRACTOR TO
(If an effective date is listed, the date must be spe	ecific and cannot be more than five business	i days prior*
to or 90 days after the date of filing.)		90
	7.72	· ·

REQUIRED SIGNATURE:

English & Band 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.)

EZEQUIEL ROSAS BALTAZAR

Typed or printed name of signee

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)

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