

# L06000116820

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*[Handwritten signature]*

Office Use Only

FF \$125  
cc/cus 35



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12/07/06--01001--016    \*\*160.00

Effective Date 11/20/06

W06-49883

Rec'd. 11/14/06

FILED  
06 NOV 14 PM 2:44  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

- \$
- RA sign.
- sign of mbr/auth rep.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Extranjero Cus, L.L.C.  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nanci Hernandez

(Name of Person)

(Firm/Company)

4531 5th Ave. N.W.

(Address)

Naples, FL 34119

(City/State and Zip Code)

For further information concerning this matter, please call:

Nanci Hernandez

(Name of Person)

at ( 239 ) 455-7294

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 14, 2006

NANCI HERNANDEZ  
4531 5TH AVE. N.W.  
NAPLES, FL 34119

SUBJECT: EXTRANJERO CUS, LLC  
Ref. Number: W06000049883

We have received your document for EXTRANJERO CUS, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$160.00.

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock  
Senior Section Administrator

Letter Number: 606A00066726

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Effective Date

11/20/06

Extranjero Cus, LLC

(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:

4531 5th Ave. N.W.

same

Naples, FL 34119

## 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:

Silvia Jovel

Name

4531 5th Ave. N.W.

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

Naples, FL 34119

City, State, and Zip

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DIVISION OF CORPORATIONS  
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*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..*

x Maria S Jovel

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

**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:**

MGRM

Juan Pardo  
27971 Edith Lane  
Bonita Springs, FL 33923

MGRM

Saira Hernandez  
4531 5th Ave N.W.  
Naples, FL 34119

MGRM

Jose Lovel  
4531 5th Ave. N.W.  
Naples, FL 34119

MGR

Nanci Hernandez  
4531 5th Ave NW  
Naples, FL 34119

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: November 20, 2006. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

X   
\_\_\_\_\_  
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.)

Nanci Hernandez

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)**