## L07000009787

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PICK-UP WAIT MAIL
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## LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

WIAMI, FL 33165 (305) 552-5973

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MIAMI, FL 33 105 (305) 352-39	/3	- K. K.
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CORPORATION NAME(S) & DOCUMI	ENT NUMBER(S), (if known):	Or The state of th
CARLOS GARCIA L	16	
(Corporation Name)	(Document #)	
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Walk in Pick up time	Certified Copy	
Mail out Will wait	Photocopy Certificate of S	latus
NEW FILINGS	AMENDMENTS	
Profit	☐ Amendment	
Nor for Profit	Resignation of R.A., Officer/Director	
Limited Liability  Domestication	Change of Registered Agent Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report	Foreign	
Fictitious Name	Limited Partnership	: · · · ·
	Reinstatement	
	Trademark Other	
CDDDA21/G/00	Examiner's Ini	tials

ARTICLE I - Name:	The second secon
The name of the Limite	ed Liability Company is:
CARLOS GA	RCIA LLC
Must end with the words "Lin	nited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Addre	90°
	ss: nd street address of the principal office of the Limited Liability Company
<b>3</b>	
Principal Office Addi	ress: Mailing Address:
141,30 GA)	50 St 1/030 SW ED ST
Micon: F/	50 ST 14630 SW 50 ST 33175 Miami FL 33175
	stered Agent, Registered Office, & Registered Agent's Signature:
	my cannot serve as its own Registered Agent. You must designate an individual or another
(The Limited Liability Compa business entity with an active	my cannot serve as its own Registered Agent. You must designate an individual or another e Florida registration.)
(The Limited Liability Compabusiness entity with an active) The name and the Flori	any cannot serve as its own Registered Agent. You must designate an individual or another Elorida registration.)  ida street address of the registered agent are:
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(The Limited Liability Compabusiness entity with an active) The name and the Flori	my cannot serve as its own Registered Agent. You must designate an individual or another e Florida registration.)

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

## The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_ (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:** 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.) S OARCIA Typed or printed name of signee

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

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)