

W07000109836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

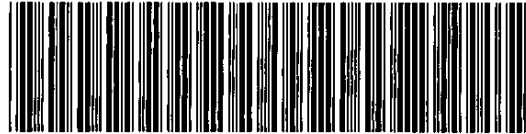
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400111332754

10/29/07--01063--008 **155.00

FILED

2007 OCT 29 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W07-109836
QR

11-1-07

October 27th, 2007

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

SUBJECT: DEL SOL CONSULTING, LLC

I enclose the Articles of Organization and fees amounting to \$155.00 for the filing, designation of registered agent and certified copy of these articles. Please return all correspondence concerning this matter to the following:

Martha Villabona, Manager
DEL SOL CONSULTING, LLC
6255 SW 85st Street
Miami, FL 33143

For further information concerning this matter, please call Martha Villabona 786-374-5537.

Sincerely,


Martha Villabona

2007 OCT 29 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name: DEL SOL CONSULTING, LLC

The name of the Limited Liability Company is:

DEL SOL CONSULTING, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability company is:

Principal Office Address

DEL SOL CONSULTING, LLC

6255 SW 85th Street

Miami, FL 33143

Mailing Address

DEL SOL CONSULTING, LLC

6255 SW 85th Street

Miami, FL 33143

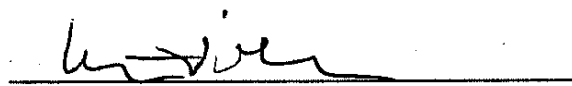
ARTICLE III – Registered Agent, Registered Office and Registered Agent's Signature:

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

Martha Villabona
6255 SW 85th Street
Miami, FL 33143

Having been named as registered agent and to accept service of process for the above state 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, Florida Statutes.

FILED
2007 OCT 29 PM 2:17
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



11-1-07

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

The name and address of each Manager or Managing Member is as follows:

<u>Title</u>	<u>Name and Address</u>
"MGR" = Manager	
"MGMR" = Managing Member	
MGR	Martha Villabona 6255 SW 85 th Street Miami, FL 33143

MGMRs	Martha Maria Villabona 6255 SW 85 th Street Miami, FL 33143
-------	--

ARTICLE V – Effective Date:

The effective date of this limited liability company is November 1st, 2007

REQUIRED SIGNATURE:



(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties for perjury that the facts stated herein are true.)

Martha Villabona, Manager

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 OCT 29 PM 2:17

FILED