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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

795 LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

705 8W 0TH STREET ______

2030 8. DOUGLAS ROAD SUITE 119 CORAL GABLES, FL 33134

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 cutity with an active Plaride registration.)

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

BPA ACCOUNTING SERVICES INC
Name
2030 S. DOUGLAS ROAD SUITE 119
Elected street address (B.O. Bay NOT appartable)

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

CORAL GABLES FI. 3.31.24 City, State, and Kip

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.

Registored Apent' ure (REQUIRED)

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

- 5

Title: "MGR" = Manager "MGRM" - Managing Member

Name and Address;

MGRM	ROLANDO ARMENGOL
* <u>ii**</u> *	2030 S. DOUGLAS ROAD SUITE 119
	CORAL GABLES, FL 33134
MGRM	MARIA M. ARMENGOL
	2020 S. DOUGLAS ROAD SUITE 119
	CORAL GABLES, FL 39134

(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.)

REOUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(in accordance with section 608,408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROLANDO ARMENGOL Typed or printed name of signee

Elling Peca:

\$125.00 Filing Fee for Articles of Organization and Designation af Registered Agent 5 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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