

# L10000005065

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

Effective Date 01/13/10

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**arco properties of florida, llc**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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10 JAN 14 PM 3:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

JAN 15 2009

EXAMINER  
1/14/2010

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Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARCO PROPERTIES OF FLORIDA, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

5275 Images Circle Suite 105  
Kissimmee, FL 34746

Mailing Address:

5275 Images Circle Suite 105  
Kissimmee, FL 34746

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:

Effective Date 01/13/10

SERGIO E. HECHIM

Name

5275 Images Circle Suite 105

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

Kissimmee FL 34746

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.*

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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10 JAN 14 AM 8:05  
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TALLAHASSEE, FLORIDA

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**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

Jose L. Freitas  
5275 Images Circle Apt 105  
Kissimmee, FL 34746

MGRM

Carlos J. Rodriguez  
2431 Praise View Dr  
Winter Garden, FL 34787

MGRM

Gullermo A. Duplessis  
3915 Township Square Blvd Apt 1412  
Orlando, FL 32837

MGRM

Claudia Revollo  
5980 Westgate Dr Apt 201  
Orlando, FL 32835

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01/13/2010 (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.)

Sergio E. Hechim

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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**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

Sergio E. Hechim  
 5275 Images Circle Apt 105  
 Kissimmee, FL 34746

MGRM

Rodolfo A. Martuchi  
 3915 Township Square Blvd Apt 1412  
 Orlando, FL 32837

MGRM

Carlos A. Ontivero  
 4823 Watervista Dr  
 Orlando, FL 32821

MGRM

Carlos A. Saez  
 2624 Holly Pine Circle  
 Orlando, FL 32820

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01/13/2010 (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(1), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sergio E. Hechim

Typed or printed name of signer

**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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