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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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EXAMMER

COVER LETTER

Division of Corporations					
SUBJECT: Service Tax LLC					
Name of Limit	ed Liability Comp	any			
The enclosed Articles of Organization and fee(s) are	submitted for filin	g.			
Please return all correspondence concerning this mat	ter to the following	<i>5</i> :			
Jorge H Guasca	N. FD.				
	Name of Person				
Service Tax LLC					
	Firm/Company				
9365 Fontainebleau Blvd S	S-E240				
	Address				
Miami FL 33172			· ··· <u>-</u> ,,		
Ci	ty/State and Zip Cod	c		4	
service.tax@hotmail.com	C				201
E-mail address: (to be used For further information concerning this matter, pleas		ort nottrication)		CRETARY LAHASSE	30:1 K4 1- A0N 1:02
Jorge H Guasca	at (305	335-7338		7.33 70.4	
Name of Person	Area Cod	e & Daytime Telep	hone Number	STA	±¥
Enclosed is a check for the following amount:				ATE	0.5
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional cor	рру	\$160.00 Fil Certificate Certified C (additional co	of Statu opy	s &
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton I 2661 Ex	Courier Address tion Section of Corporations Building ecutive Center Cosec, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company i	S:	
Service Tax LLC		
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
9365 Fontainebleau Blvd S-E240 Miami FL 33172	9365 Fontainebleau Blvd S- Miami FL 33172	E240
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regions entity with an active Florida registration.)		
The name and the Florida street address of the	e registered agent are:	
Jorge H Guasca		
Nan		
9365 Fontaineble	eau Blvd S-E240	
	address (P.O. Box <u>NOT</u> acceptable)	
Miami	FL 33172	
Спу,	State, and Zip	
Having been named as registered agent and the liability company at the place designated in registered agent and agree to act in this capace statutes relating to the proper and complete accept the obligations of my position as referenced gent's sign. Registered agent's sign. (CONTI	n this certificate. I hereby accept to city. I further agree to comply with performance of my duties, and I agriced agent as provided for in a provided for in the mature (REQUIRED)	the appointment as th the provisions of all un familiar with and

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

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jorge H Guasca 9365 Fontainebleau Blvd S-E240
	Miami FL 33172
(Use attachment if necessary) CLE V: Effective date, if other than the	e date of filing: (OPTIONAL)
CLE V: Effective date, if other than the effective date is listed, the date must be	e date of filing: (OPTIONAL) be specific and cannot be more than five business days p
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	e date of filing: (OPTIONAL) be specific and cannot be more than five business days per or an authorized representative of a member.
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signatur of members of accordance with section 60 constitutes an affirmation under Lam aware that any false infor constitutes a third degree felometric dates.	er or an authorized representative of a member. 8.408(3). Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signatur of members of accordance with section 60 constitutes an affirmation under Lam aware that any false infor constitutes a third degree felometric dates.	er or an authorized representative of a member. 8.408(3). Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of state by as provided for in s.817.155. F.S.)
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signatur of members of accordance with section 60 constitutes an affirmation under Lam aware that any false infor constitutes a third degree felon	er or an authorized representative of a member. 8.408(3). Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of state by as provided for in s.817.155. F.S.)