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J. SAULSBERRY EXAMINER JAN 19

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CT: Alberto Tornes Manu Factures LL Name of Limited Liability Company
The end	losed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
-	Alberto Torres  Name of Person  Firm/Company  5823 Hidden oakes LN, IDE 5
-	Firm/Company  Firm/Company  FIRM/Company  FROM THE TOTAL TOTAL THE
_	5823 Hidden oakes LN. BA
-	City/State and Zip Code  Cool run Air & 1/4hoo. Com  E-mail address: (to be used for future annual report notification)
For furth	ner information concerning this matter, please call:
	Name of Person at (239) 272-5212  Name of Person Area Code & Daytime Telephone Number
/	d is a check for the following amount:  Filing Fee \$\int \\$130.00 \text{ Filing Fee & Certificate of Status}\$  Certificate of Status \$\int \text{Certified Copy (additional copy is enclosed)}}  \$\int \\$155.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}\$
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR.	Alberto Torres 5823 Hidden Dayos LN. Naples FL. 34/19.
	ZOII SE TAL
	ZOIZ JAN 17 AM SETRETARY OF STALLAHASSEE, F
(Use attachment if necessary)	AM 8: 44 E. FLORIDA
ARTICLE V: Effective date, if other than the If an effective date is listed, the date must be so or 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	er or an authorized representative of a member.
(In accordance with section 608 constitutes an affirmation unde I am aware that any false information constitutes a third degree felon	8.408(3), Florida Statutes, the execution of this document rethe penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
	ped 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)