

L1200003444

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

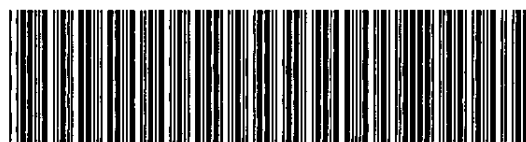
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MAR 12 2012

EXAMINER



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FILED
12 MAR -9 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 5, 2012

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Articles of Organization for Villanueva Rodriguez & Associates, LLC.

Florida Department of State:

Please find enclosed FL articles of organization and designation of registered agent for:

Villanueva Rodriguez & Associates, LLC.

9135 NW 191 Terr.

Miami, FL 33018

Tel: 786 247 9820

Registered agent: Federico Villanueva Hernández

Managing Partners:

1. Federico Villanueva Hernández
2. Darling Rodriguez Cruz

Any questions, please contact Miguel Ruiz at 954 318 7940.

Sincerely,



Federico Villanueva Hernandez

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Villanueva Rodriguez & Associates, LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Federico Villanueva Hernandez

Name of Person

Firm/Company

440 Sawgrass Corporate Pkwy Ste 112

Address

Sunrise, FL 33325

City/State and Zip Code

FVillanueva@Villanuevarodriguez.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miguel Ruiz

Name of Person

at (954) 318 7940

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Villanueva Rodriguez & Associates, 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:

9135 NW 191 Trm.
MIAMI, FL 33018

Mailing Address:

9135 NW 191 Trm
MIAMI, FL 33018

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:

Frederico Villanueva Hernandez

Name

9135 NW 191 Trm

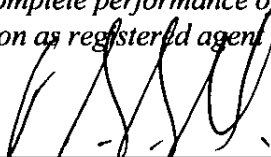
Florida street address (P.O. Box **NOT** acceptable)

MIAMI, FL 33018

City, State, and Zip

FILED
12 MAR -9 PM 2:26
REGISTRAR OF STATE
TALLAHASSEE, FLORIDA

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

MGRM

MGRM

Name and Address:

Federico Villanueva Hernandez
9135 NW 191 Terr
MIAMI, FL 33018


Darling Rodriguez Cruz
9135 NW 191 Terr
MIAMI, FL 33018

(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.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

DARLING Rodriguez Cruz

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)