

L13000012641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

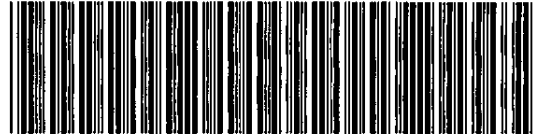
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BETO POOL & TILE 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:

EDGAR AMAYA

Name of Person

TAMIAMI AGENCY INTERNAL DOCUMENT LLC

Firm/Company

701 SW 27 AVE # G- 4

Address

MIAMI FL 33135

City/State and Zip Code

TAMIGRATION@HOTMAIL.COM

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

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

EDGAR AMAYA

Name of Person

at **(305) 642-9676**

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:

BETO POOL & TILE 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:

14925 SW 104 ST B. 3 # 104

MIAMI FL 33196

Mailing Address:

14925 SW 104 ST B. 3 # 104

MIAMI FL 33196

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:

HUMBERTO JOSE MAIRENA HERNANDEZ

Name

14925 SW 104 ST B. 3 # 104

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


MIAMI FL 33196

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

Name and Address:

MGR

HUMBERTO JOSE MAIRENA HERNANDEZ

14925 SW 104 ST B.3 # 104

MIAMI FL 33196

(Use attachment if necessary)

2013 JAN 22 PM 4:30
FILED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V: Effective date, if other than the date of filing: 01/17/2013 (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:

Humberto mairena
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.)

HUMBERTO JOSE MAIRENA HERNANDEZ

Typed or printed name of signee

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HUMBERTO JOSE MAIRENA HERNANDEZ

Name

14925 SW 104 ST B. 3 # 104

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

MIAMI FL 33196

City, State, and Zip

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Registered Agent's Signature (REQUIRED)

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"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

HUMBERTO JOSE MAIRENA HERNANDEZ

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TALLAHASSEE, FLORIDA

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REQUIRED SIGNATURE:

Humberto mairena

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

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HUMBERTO JOSE MAIRENA HERNANDEZ

Typed or printed name of signee