## L13000038325

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000244609330

Effective Date 3-8-2013

02/25/13--01060--006 \*\*130.00

2013 MAR 12 AM 8+52

J. SAULSBERRY EXAMINER

MAR 13 2013

## **COVER LETTER**

TO:	Registration S Division of Co						
	Sara	i Services LL	С				
SUBJI	ECT:		ed Liability Comp	any			
The on	alosad Astislas pa	f Organization and fee(s) are s	whenitted for filin	a			
				_			
Please	return all corresp	ondence concerning this matt	er to the following	ζ:			
	Maria A	na Valle					
			Name of Person	****			
	Sarai S	ervices LLC					
			Firm/Company				
	1139 N	E 127th Stree	et				
			Address				
	North M	liami FL 3316	61		TALI	2013 MAR 12 SECRETAR	
		Cit	y/State and Zip Coo	le		***	د سین ر
	mariasol	_62@hotmail.c			<u> </u>	三二	_
		E-mail address: (to be used t	_	ort notification)	  	7 4.	Ĺ
		concerning this matter, please	caii:			AM & 52	į., .
Ma	ria Ana	Valle	<sub>at (</sub> 786	ຸ970-83	334 - {	52	
<u></u>	Name	of Person		le & Daytime Telep	phone Number		
Enclo	sed is a check fo	or the following amount:					
<b>□\$</b> 125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Co	ing Fee &  uppy py is enclosed)	\$160.00 Filin Certificate o Certified Co (additional cop	f Status &	)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address ution Section of Corporations Building tecutive Center Cossee FL 32301	5		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	<b>::</b>			
Saraí Services LLC				
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Lia	ability C	ompan	ıy is:
Principal Office Address:	Mailing Address:			
1139 NE 127th Street	1139 NE 127th Street			
North Miami FL 33161	North Miami FL 33161			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)  The name and the Florida street address of the  Sergio A Alarcon  Name  1140 NE 127th Street #B2  Florida street as	registered agent are:			
North Miami	33161	L PR	<b>Q</b>	()
City, S	State, and Zip		52	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and comple and accept the obligations of my position as recommendated agent and accept the Registered Agent's Sign	this certificate, I hereby accept the city. I further agree to comply with the performance of my duties, and registered agent as provided for in	he appoii ith the pr ! I am fan	ntment ovision niliar v	as ns of with

(CONTINUED)

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>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Sergio A Alarcon
	1140 NE 127th Street #B2
	North Miami FL 33161
LE V: Effective date, if other than	the date of filing: 03/08/2013 . (OPTIO)
effective date is listed, the date m o or 90 days after the date of filing	ust be specific and cannot be more than five busi
LE V: Effective date, if other than affective date is listed, the date me or 90 days after the date of filing	ust be specific and cannot be more than five busi
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE:	ust be specific and cannot be more than five busi
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE:  (In accordance with section constitutes an affirmation up I am aware that any false interpretation of the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation up I am aware that a aware that a aware that a aware that a aware	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document neder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE:  (In accordance with section constitutes an affirmation up I am aware that any false interpretation of the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation in the section constitutes are affirmation up I am aware that any false interpretation up I am aware that a aware that a aware that a aware that a aware	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document noder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing effective.  REQUIRED SIGNATURE:  Signature of a merodance with section constitutes an affirmation we have a section constitutes at third degree feet.	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document noder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing effective.  REQUIRED SIGNATURE:  (In accordance with section constitutes an affirmation up I am aware that any false in constitutes a third degree females.)	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document noder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing effective.  REQUIRED SIGNATURE:  Signature of a merodance with section constitutes an affirmation we have a section constitutes at third degree feet.	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document noder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a men of a m	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)  Typed or printed name of signee
LE V: Effective date, if other than effective date is listed, the date me or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a mere (In accordance with section constitutes an affirmation us I am aware that any false in constitutes a third degree fe Maria Ana Valle  Filing Fees:	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document noder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State llony as provided for in s.817.155, F.S.)