13000138407

•		
(1	Requestor's Name)	. ,
(Address)	
(.	Address)	
(1	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(1	Business Entity Nam	ne)
(1	Document Number)	
Certified Copies		
Special Instructions	to Filing Officer:	
	·	

Office Use Only



500252097895

09/30/13--01057--005 **125.00

2019 SEP 30 PM 4: 09
STATE
SECRETARY OF STATE
LORID

OCT - 1 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pyko 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:

Alfredo	Abreu					
 		Name of Person				
Pyko L	LC					
		Firm/Company				
2590 N	W 99th Ave					
		Address		1	· -	
Doral, f	FL 33172				PSE PSE	2813
abreualfre	edo@yahoo.com	y/State and Zip Cod			AHAS.	SEP 30
For further information	E-mail address: (to be used concerning this matter, please	•	ort notification)		3 38 A	PH
Alfredo Ab	reu	786	897-3	378	TATE	կ։ 09
Name	of Person	Area Cod	e & Daytime Tele			
Enclosed is a check for	or the following amount:	•				
\$125.00 Filing Fcc	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filis Certified Co (additional cop	рру	2 \$160.00 Fi Certificate Certified C (additional c	of Statu Copy	ıs &
	Mailing Adduses	Street/C	Saurian & Adussa	_		

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 Comp	pany is:
,,,,,,,,,	
Pyko LLC	•
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2590 NW 99th Ave	2590 NW 99th Ave
Doral, FL 33172	Doral, FL 33172
	with the spirit of the spirit
The name and the Florida street address Alfredo Abreu	of the registered agent are:
•	
2590 NW 99th Ave	
	street address (P.O. Box NOT acceptable)
Doral, FL 33172	City, State, and Zip
	City, State, and Zip
liability company at the place designate registered agent and agree to act in this all statutes relating to the proper and	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointing it as- is capacity. I further agree to comply with the processions of complete performance of my duties, and I antifamiliar with an as registered agent as provided for in Chapter 608, F.S.
Registered Agen	t's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:		Name and Address:
	= Manager " = Managing Member	
MGR		Alfredo Abreu
		2590 NW 99th Ave
		Doral, FL 33172
		•
<u></u>		
EV: E		the date of filing: 9/27/2013 . (OPTIC
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date n eys after the date of filing	nust be specific and cannot be more than five bus
LE V: E fective o or 90 da	Iffective date, if other than	nust be specific and cannot be more than five bus
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date n eys after the date of filing	nust be specific and cannot be more than five bus
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date nays after the date of filing RED SIGNATURE:	nust be specific and cannot be more than five bus
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date is listed, the date of filing and the state of filing and the state of signature of a metal state of a metal state of the state of t	must be specific and cannot be more than five bus g.) Ember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State clony as provided for in s.817.155, F.S.)
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date is listed, the date of filing ays after the date of filing SEED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation up I am aware that any false in	must be specific and cannot be more than five bus g.) Ember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State clony as provided for in s.817.155, F.S.)
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date is listed, the date of filing and the state of filing and the state of signature of a metal state of a metal state of the state of t	must be specific and cannot be more than five buses. Sember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State telony as provided for in s.817.155, F.S.)
LE V: E fective o or 90 da	Effective date, if other than date is listed, the date is listed, the date of filing and the state of filing and the state of signature of a metal state of a metal state of the state of t	must be specific and cannot be more than five buses. Sember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of
LE V: Effective of 90 da	Signature of a mé (In accordance with section constitutes an affirmation used a management of a mé and a management of a mé and a management of a mé a m	must be specific and cannot be more than five buses. Sember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of
LE V: E fective of or 90 da	Signature of a mé (In accordance with section constitutes an affirmation u I am aware that any false in constitutes a third degree for Affredo Abreu ling Fees:	must be specific and cannot be more than five buses. Sember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State called the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of
LE V: E fective of or 90 da REQUE	Signature of a mé (In accordance with section constitutes an affirmation used a management of a mé and a management of a mé and a management of a mé a m	must be specific and cannot be more than five bused. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State clony as provided for in s.817.155, F.S.) Typed or printed name of signce Organization and Designation