

Division of Corporations

L1400082314

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
TORRES CONTRERAS LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

MAY 21 2014

J. BRUCE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The Name of the Limited Liability Company is:

TORRES CONTRERAS 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 Limited Liability Company is:

Principal Office AddressMailing Address1820 N Corporate Lakes Blvd suite 207-10
Weston, FL333261820 N Corporate Lakes Blvd suite 207-10
Weston, FL33326

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 of the Florida street address of the registered agent are:

MANUEL PRADAS

PADGETT BUSINESS SERVICES
1820 N CORPORATE LAKES BLVD, SUITE 207
WESTON, FL 33326

Having 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 appointments 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)

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

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

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03/31/2032 05:01

05/20/2014 13:05

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PADGETT

#4850 P.003/003

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Title:
MGR = Manager
MGRM = Managing Member

Name and Address:

MGRM

EDGAR TORRES
16420 South Post Road apt 304
Weston, FL 33331

MGMR

ELISA CONTRERAS
16420 South Post Road apt 304
Weston, FL 33331

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 or 90 days after the date of filing.)

REQUIRED SIGNATURE



Signature of member or an authorized representative of member.

(In accordance with the section 608.408(3), Florida Statutes, the execution of this
document constitutes an affirmation under 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.)

MANUEL PRADAS

Typed or printed name of signer

FILED
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