L14000119509

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	> #)
<u></u>	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500262746265

07/30/14--01010--006 **125.00

ZESPETARY OF STATE

JUL 3 0 2014 T CLINE

COVER LETTER

	tegistration Division of C	Section Corporations				
SUBJECT	Γ: Siti Art	Services, LLC Name of Li	mited Liability Company			
		of Organization and fee(s) a				
Please rett	irn all corres	spondence concerning this n	natter to the following:			
	Patricia E	3. Silva	Name of Person			-
•						
	Siti Art Se	ervices, LLC	n' (n			-
			Firm/Company			
	15724 S	W. 82nd Court			温め	2 1 114
•	15,24 0.	VV. OZNO GODIC	Address		は高	20 JUL 30
					줐;	က်
	Palmetto	Bay, FL. 33157	City/State and Zip Code			-
	_		City/State and Zip Code		-11 CO	
<u>omp3</u>	383@aol.co	em E-mail address: (to be use	ed for future annual report notifica	ition)	35.7	-:-
For further	r information	concerning this matter, ple	ease call:		22	
		,				
<u>Kevin De</u>	mers	at (305) 232-1761			
	Nam	e of Person	Area Code Daytime Tel	ephone Number		
Enclosed i	s a check for	the following amount:				
□ \$125.00 F		□\$130.00 Filing Fee & Certificate of Status	☐\$155,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Certified Copy	Status &	
	Regi Divis P.O.	ing Address stration Section sion of Corporations Box 6327 hassee, FL 32314	Street/Courier Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
Siti Art Services, LLC (Must end with the words "Limi	ted Liability Company, "L.L.C.,"	or "LLC,")
ARTICLE II - Address: The mailing address and street address of the principa	I office of the Limited Liability Co	ompany is:
Principal Office Address:	Mailing Address:	
15724 S.W. 82nd Court Palmetto Bay, Fl. 33157		
ARTICLE III - Registered Agent, Registered Offic (The Limited Liability Company cannot serve as its or another business entity with an active Florida registra	wn Registered Agent. You must detion.)	
The name and the Florida street address of the register	red agent are:	
Kevin Demers Na:	me	
15724 S.W. 82nd Court Florida street address (P.O. E	Box <u>NOT</u> acceptable)	
Palmetto Bay,	FL 33157	
City	Zip	
Having been named as registered agent and to accept the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the Charles Registered Agent's Sig	rept the appointment as registered and of all statutes relating to the propobligations of my position as registrapter 605, F.S	agent and agree to act in this per and complete performance
		30 2
(CONTIN	iued)	
Page 1 o	of2	EURLIARY OF STATE LLAHASSEELFLURION

**MGR" = Manager AMBR Patricia B, Silva 15724 S.W. 82nd Court Palmetto Bay, FL. 33157	Title:	Name and Address:	
AMBR Patricia B. Silva 15724 S.W. 82nd Court Palmetto Bay, FL. 33157 (OPTIONAL) (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true: (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true: 1 am aware that any false information submitted in a document to the Department of State. 1 am aware that any false information submitted in a document to the Department of State. 1 am aware that any false information submitted in a focument to the Department of State. 1 am aware that any false information submitted in a focument to the Department of State. 1 am aware that any false information submitted in a focument to the Department of State. 1 am aware that any false information of the penaltment of State. 1 am aware that any false information and of the penaltment of State. 1 am aware that any false information and of the penaltment of State. 1 am aware that any false information and of the penaltment of State. 1 am aware that any false information of the penaltment of State. 1 am aware that any false information and Designation of Registered Agent.	"AMBR" = Authorized Member		
15724 S.W. 82nd Court Palmetto Bay, FL. 33157		Patricia R. Silva	
(Use attachment if necessary) E. V.: Effective date, if other than the date of filing: Letive date is listed, the date must be specific and cannot be more than five business days prior to or 90 day of filing.) E. V.: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Plorida 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.) Patricia B. Silva Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	AIVIDR		
(Use attachment if necessary) E. V.: Effective date, if other than the date of filing:			
Use attachment if necessary) E. V.: Effective date, if other than the date of filing:		Familietto Day, Ft. 33107	
Use attachment if necessary) E. V.: Effective date, if other than the date of filing:			
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:			
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	•		
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			
(Use attachment if necessary) E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
E V: Effective date, if other than the date of filing:			
Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), 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.) Patricia B. Silva Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date excive date is listed, the date must be spe	of filing: (OPTIONAL) ceific and cannot be more than five business days prior to or 90	day
Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), 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.) Patricia B. Silva Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if other than the date excrive date is listed, the date must be spen of filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90	day
(In accordance with section 605.0203 (1) (b), 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.) Patricia B. Silva Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90	day
(In accordance with section 605.0203 (1) (b), 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.) Patricia B. Silva Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date ective date is listed, the date must be spoof filing.) E VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 90	day
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.) Patricia B. Silva Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date extive date is listed, the date must be spe f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mer	mber or an authorized representative of a member.	day
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date extive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 60)	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document	
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date extive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 60) constitutes an affirmation under	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true:	
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date ctive date is listed, the date must be spe f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 60: constitutes an affirmation under I am aware that any false inforr	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true:	
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if other than the date ctive date is listed, the date must be spe f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 60: constitutes an affirmation under I am aware that any false inforr	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document ration submitted in a document to the Department of State y as provided for in s.817.155, F.S.)	
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if other than the date ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mere (In accordance with section 60: constitutes an affirmation under 1 am aware that any false information constitutes a third degree felonger.	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true; or mation submitted in a document to the Department of State or y as provided for in s.817.155, F.S.)	
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if other than the date ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mere (In accordance with section 60: constitutes an affirmation under 1 am aware that any false information constitutes a third degree felonger.	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true; or mation submitted in a document to the Department of State or y as provided for in s.817.155, F.S.)	
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if other than the date ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mere (In accordance with section 60: constitutes an affirmation under 1 am aware that any false information constitutes a third degree felonger.	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document r the penalties of perjury that the facts stated herein are true; or mation submitted in a document to the Department of State ray as provided for in s.817.155, F.S.)	2014 JUL 30
	E V: Effective date, if other than the date ective date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mendance with section 60: constitutes an affirmation under 1 am aware that any false inform constitutes a third degree felony. Patricia B. Silva	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document rather penalties of perjury that the facts stated herein are trues of a mation submitted in a document to the Department of State are y as provided for in s.817.155, F.S.)	2014 JUL 30
	EV: Effective date, if other than the date ctive date is listed, the date must be spot filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 60: constitutes an affirmation under 1 am aware that any false inform constitutes a third degree felony. Patricia B. Silva	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document rependities of perjury that the facts stated herein are true; or mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent	