

L14000153410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

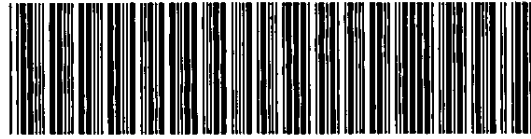
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

OCT - 1 2014

A. LUNT

Office Use Only



000263397880

000263397880
09/24/14--01024--021 **130.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2014 SEP 22 PM 2:55

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAT EXCAVATION, 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:

CARLOS TERRIENTES
Name of Person

CAT EXCAVATION, LLC
Firm/Company

138 SW 7TH TERRACE
Address

HALLANDALE BEACH, FLORIDA 33009
City/State and Zip Code

GTERRIENTES@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GEORGIANA TERRIENTES at (754) 273-2292
Name of Person 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

FILED
 2014 SEP 22 PM 2:55
 TALLHASSEE, FLORIDA
 DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
2014 SEP 22 PM 2:55
THE CLERK OF SUPERIOR
COURT
HALLANDALE BEACH, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

CAT EXCAVATION, 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:

Mailing Address:

138 SW 7TH TERRACE
HALLANDALE BEACH, FLORIDA 33009

138 SW 7TH TERRACE
HALLANDALE BEACH, FL 33009

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.)

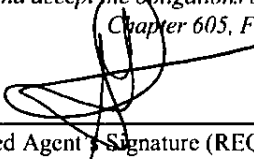
The name and the Florida street address of the registered agent are:

GEORGIANA TERRIENTES
Name

138 SW 7TH TERRACE
Florida street address (P.O. Box **NOT** acceptable)

HALLANDALE BEACH FL 33009
City Zip

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 605, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:
"AMBR" = Authorized Member
"MGR" = Manager
AMBR

Name and Address:
CARLOS TERRIENTES
138 SW 7TH TERRACE
HALLANDALE BEACH, FL 33009

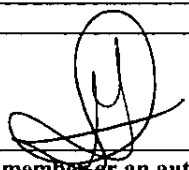
FILED
2014 SEP 22 PM 2:55

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 09/19/2014 (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.)

ARTICLE VI: 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), 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.)

Georgiana Terrientes
Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)