## L14000158826

(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:			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Re	equestor's Name)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Ad	ldress)	
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Ad	dress)	
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Ci	h/State/7in/Dhon	e th
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Cil	ty/State/Zip/Photo	<del>e                                    </del>
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	PICK-UP	WAIT	MAIL
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Bu	siness Entity Nar	ne)
Special Instructions to Filing Officer:	(Do	cument Number)	
·	Certified Copies	_ Certificates	s of Status
	Special Instructions to	Filing Officer:	
•			
			<u> </u>



100263656591

130.00

03/04/14--01003--013



EFFECTIVE DATE

FILED
14 OCT -6 PH 2: 25
SECRETARISMENT STATE
TALLAHASMENT FI ORION

WH-55102

OCT 1 0 2014

T RROWM

## **COVER LETTER**

3

, TO:

No:	Registration Section Division of Corporations	3	٠.
	·		
SUBJE	CCT: <u>Jorge Bonilla Services, LLC</u> Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing	
	return all correspondence concerning this m	_	
		-	
	Jorge Bonilla	Name of Person	
	Jorge Bonilla Services, LLC		
		Firm/Company	
	1820 Fairfax Drive		· · · · · · · · · · · · · · · · · · ·
		Address	
	Ft. Lauderdale, FL 33312	City/State and Zip Code	
joi	rgebonilla123@vahoo.com	•	
For fire	E-mail address: (to be use ther information concerning this matter, ple	d for future annual report notifica	ition)
	morning in a matter, pro	use oun.	
<u>Jorge</u>	Bonilla Services, LLC at ( Name of Person	571 ) 229-8554 Area Code Daytime Te	lephone Number
Enclose	ed is a check for the following amount:		
	0 Filing Fee  \$\overline{\subset}\$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 Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions ter Circle



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 10, 2014

JORGE BONILLA 1820 FAIRFAX DRIVE FORT LAUDERDALE, FL 33312

SUBJECT: JORGE BONILLA SERVICES, LLC

Ref. Number: W14000055402

We have received your document for JORGE BONILLA SERVICES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 414A00019393

Teresa Brown Regulatory Specialist II

www.sunbiz.org



September 22, 2014

COURTNEY WEGGELAND 2155 N 14TH AVE HOLLYWOOD, FL 33020 2ND ML

SUBJECT: JORGE BONILLA SERVICES, LLC

Ref. Number: W14000055402

We have received your document for JORGE BONILLA SERVICES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 414A00019393

## EFFECTIVE DATE

ART	ICLES OF ORGANIZATION FOR	RFLORIDA LIMITED LIABILITY (	COMPANY
ARTICLE I - Name: The name of the Limite	d Liability Company is:		0CT-6
Jorge Bonilla Service	es IIC		Er. P.
()	Just end with the words "Limite	ed Liability Company, "L.L.C.," o	or "LLC.") The for
ARTICLE II - Addres	ss:	office of the Limited Liability Co	VALE ORIL
Principal Office Addr	ess:	Mailing Address:	
1820 Fairfax Drive Ft. Lauderdale, FL 3	3312	1820 Fairfax Drive Ft. Lauderdale, FL 33312	2
(The Limited Liability another business entity		•	
	Courtney Weageland		
	Nam	ne .	
	2155 N 14th Ave.		
	Florida street address (P.O. Bo	ox NOT acceptable)	
	Hollywood	FL 33020	
	City	Zip	
the place designated capacity. I further ag	l in this certificate, I hereby acce ree to comply with the provision m familiar with and accept the o Cha	ervice of process for the above sta pt the appointment as registered a s of all statutes relating to the pro- bligations of my position as regist pter 605, F.S	agent and agree to act in this per and complete performance

Page 1 of 2

(CONTINUED)

<u>[itle:</u> AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	- ecro
Mer	Jorge Bonilla Services LLC
	1820 Fairfax Orlve
	Ft Lauderdale, FL 33312
MGR	Jorge Bonilla
1.1017	1820 Fairfax Drive
	Ft. Lauderdale, FL 33312
(Use attachment if necessary)	
E V: Effective date, if other than the date ective date is listed, the date must be spe	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sporf filing.)	
LE V: Effective date, if other than the date fective date is listed, the date must be sport filing.)  LE VI: Other provisions, if any.	
EV: Effective date, if other than the date ective date is listed, the date must be spof filing.)	
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me	ecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me (In accordance with section 60)	ecific and cannot be more than five business days prior to or  mber or an authorized representative of a member.  15.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under the section of the sect	ecific and cannot be more than five business days prior to or  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.
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.  REQUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under I am aware that any false information.)	ecific and cannot be more than five business days prior to or  mber or an authorized representative of a member.  15.0203 (1) (b), Florida Statutes, the execution of this document
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.  REOUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felonic	ecific and cannot be more than five business days prior to or  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, mation submitted in a document to the Department of State
E V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under I am aware that any false information.)	ecific and cannot be more than five business days prior to or  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, mation submitted in a document to the Department of State
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felonic	ecific and cannot be more than five business days prior to or  mber or an authorized representative of a member.  15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State may as provided for in s.817.155, F.S.)  Typed or printed name of signee
LE V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felonial.	ecific and cannot be more than five business days prior to or  mber or an authorized representative of a member.  15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State mation submitted in s.817.155, F.S.)  Typed or printed name of signee  Filing Fees:
E V: Effective date, if other than the date fective date is listed, the date must be spoof filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me  (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felon Jorge Bonilla	ecific and cannot be more than five business days prior to or  mber or an authorized representative of a member.  15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State may as provided for in s.817.155, F.S.)  Typed or printed name of signee