

U4000/69055

(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:

Office Use Only



900265721659

10/27/14--01046--009 \*~~125.00~~ <sup>5.00</sup>

900265721659  
10/27/14--01046--010 \*\*125.00

FILED  
2014 OCT 27 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT 30 2014  
1 CLIP

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GALIANO'S GROOMING SERVICES 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:

AUGUSTO RAFAEL GALIANO

Name of Person

GALIANO'S GROOMING SERVICES LLC

Firm/Company

6141 SW 8th Street

Address

MIAMI-FLORIDA 33144

City/State and Zip Code

galianosgrooming@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Augusto Rafael Galiano

Name of Person

at ( 305 ) 262-8255

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 OCT 27 PM 1:17

FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

GALIANO'S GROOMING SERVICES 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:**

6141 SW 8th Street  
Miami-FL 33144

**Mailing Address:**

6141 SW 8th Street  
Miami-FL 33144

**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:

Augusto Rafael Galiano

Name

6141 SW 8th Street

Florida street address (P.O. Box **NOT** acceptable)

Miami

City

FL 33144

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..*

Augusto R Galiano

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
2014 OCT 27 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGMR

**Name and Address:**

Augusto Rafael Galiano

Jr. Jose Olaya 926 V.M.T.

Lima-Peru

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 10/24/2014 (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.

The Limited Liability Company is to be managed by its sole and managing member and the name and address of such managing member are Augusto Rafael Galiano Jr. Jose Olaya 926 V.M.T. Lima Peru 100 % membership interest"

**REQUIRED SIGNATURE:**

Augusto R. Galiano.

**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.)

Augusto Rafael Galiano

Typed or printed name of signee

**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)**

FILED  
2014 OCT 27 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA