Z15000019963

(Re	questor's Name)		_
(Ad	dress)		_
(Ad	dress)	1	
(Cit	y/State/Zip/Phone	e #)	_
PICK-UP	☐ WAIT	MAIL	The Lot of States
(Bu	siness Entity Nan		—
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
·			 - - -
			,

Office Use Only



100267698351

01/23/15--01007--013 **130.00

15 JAN 23 PM 4: 50

SECRETARY OF STATE
TALLAHASSEF, FI ORIGINA

T. Burch # 2 2015

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of	Corporations		
SUBJECT:	ENLIGHTENIN	IG TRANSLATION, LLC	
3003201.	Name of Lin	mited Liability Company	
The enclosed Articles	s of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
	Ma	ria Camila Pulido	
		Name of Person	
<u></u>	ENLIC	SHTENING TRANSLATION	ON, LLC
		Firm/Company	
	121 :	S. Orange Ave. Suite 150	00
		Address	·
	Or	lando, FL 32801	
	C	City/State and Zip Code	
		eningTranslation.com	
	E-mail address: (to be use	d for future annual report notific	ation)
For further information	on concerning this matter, ple	ase call:	
Maria Camila	Pulido at (407) 409-4372	
	me of Person	Area Code Daytime Te	elephone Number
Enclosed is a check f	or 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)
	rifing Address gistration Section	Street/Courier Add Registration Section	
	vision of Corporations	Division of Corpora	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Enlightening '	Translation, LLC		
 	(Must end with the words "Lis	nited Liability Company, "L.L.C.," or "LLC:")
ARTICLE II - A	ddress:		
		pal office of the Limited Liability Company is	•
Principal Office	Address:	Mailing Address:	
121 S. Orange A	Ave. Suite 1500	121 S. Orange Ave. Suite 1500	
iz i o. olaligo i			
Orlando, FL 328	Registered Agent, Registered Of	Orlando, FL 32801 Fice, & Registered Agent's Signature: own Registered Agent. You must designate an	ı individual or
ARTICLE III - F (The Limited Liab another business	Registered Agent, Registered Of pullity Company cannot serve as its entity with an active Florida regis	fice, & Registered Agent's Signature: own Registered Agent. You must designate an tration.)	15 JAN 2 SECKETA
ARTICLE III - F (The Limited Liab another business	Registered Agent, Registered Of pility Company cannot serve as its entity with an active Florida registerida Florida street address of the registerida Maria Camila Pulido	fice, & Registered Agent's Signature: own Registered Agent. You must designate an tration.)	15 JAN 23 SECKETARY TALLAHASSC
ARTICLE III - F (The Limited Liab another business	Registered Agent, Registered Of pility Company cannot serve as its entity with an active Florida registerida Florida street address of the registerida Maria Camila Pulido	Fice, & Registered Agent's Signature: own Registered Agent. You must designate and iteration.) tered agent are:	15 JAN 23 PH SECKETARY OF TALLAHASSEE, F
ARTICLE III - F (The Limited Liab another business	Registered Agent, Registered Of collity Company cannot serve as its entity with an active Florida registerida street address of the registerida Maria Camila Pulido	fice, & Registered Agent's Signature: own Registered Agent. You must designate and iration.) tered agent are: Jame	15 JAN 23 PH L: SECKETARY OF STALLAHASSEE, FLO
ARTICLE III - F (The Limited Liab another business	Registered Agent, Registered Of pility Company cannot serve as its entity with an active Florida regis Florida street address of the regis Maria Camila Pulido 121 S Orange Ave. Ste	fice, & Registered Agent's Signature: own Registered Agent. You must designate and iration.) tered agent are: Jame	15 JAN 23 PH SECKETARY OF TALLAHASSEE, F

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)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Maria Camila Pulido
	121 S. Orange Ave. Suite 1500
	Orlando, FL 32801
AMBR	Maria Claudia Magdalena Sanchez de Sanchez 3661 Jericho Drive
	Casselberry, FL 32707
	Aco -
	rm u
	<u> </u>
	No.
	Sold Sold Sold Sold Sold Sold Sold Sold
	وَ عَجَاءً عَالَمَ عَلَيْهِ ع
(Use attachment if necessary)	IDA
.E V: Effective date, if other than the date of fil	ling: (OPTIONAL)
EV: Effective date, if other than the date of fill lective data is listed, the date must be specific of filing.)	
.E V: Effective date, if other than the date of fil	ling: (OPTIONAL)
LE V: Effective date, if other than the date of fill feetive date is listed, the date must be specific of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member (In accordance with section 605.020 constitutes an affirmation under the	r or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State

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