

L15000067423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

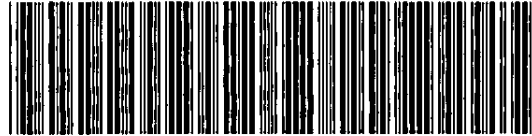
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/30/15--01009--006 **125.00

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

2015 MAR 30 PM 4:06

FILED

EFFECTIVE DATE 03/27/15

APR 17 2015
J. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REMODELING DEZIGN

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:

ROBERTO ENRIQUE PEREZ FLORENTINO

Name of Person

REMODELING DEZIGN LLC

Firm/Company

2625 NE 14TH AVE APT 305

Address

OAKLAND PARK, FL 33334-4936

City/State and Zip Code

ROEN25@GMAIL.COM

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

For further information concerning this matter, please call:

ROBERTO PEREZ

Name of Person

at (954)

Area Code

802-7793

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

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TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

REMODELING DEZIGN 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:

2625 NE 14TH AVE APT 305
OAKLAND PARK, FL 33334-4396

2625 NE 14TH AVE APT 305
OAKLAND PARK, FL 33334-4396

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.)

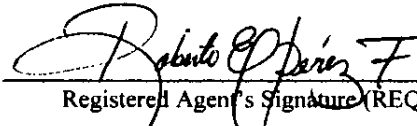
The name and the Florida street address of the registered agent are:

ROBERTO ENRIQUE PEREZ FLORENTINO
Name

2625 NE 14TH AVE APT 305
Florida street address (P.O. Box **NOT** acceptable)

OAKLAND PARK FL 33334-4396
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)

EFFECTIVE DATE 03/31/15

FILE
2015 MAR 30 PM 4:08
CLERK OF SUPERIOR COURT
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

AMGR

Name and Address:

ROBERTO ENRIQUE PEREZ FLORENTINO

2625 NE 14TH AVE APT 305

OAKLAND PARK, FL 33334-4396

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 03/27/15 (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:

Roberto P. Perez F.

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.)

ROBERTO ENRIQUE PEREZ FLORENTINO

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)

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2015 MAR 30 PM 4:06
CLERK OF THE COURT
STATE OF FLORIDA