

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. MOY LUMBER & HARDWARE, LLC.

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Corporate Filing Menu

K.SALY Help MAY - 5 2015

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	THE PARTY I COMMENT
ARTICLE I - Name:	FECCO
The name of the Limited Liability Company is:	5:4 201E
MOY LUMBER & HARDWARE, LLC.	
(Must end with the words 'Limited Liability Co	mpany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the L	iwited Liability Company is:
Principal Office Address:	Mailing Address:
11890 NW 87 CT	11890 NW 87 CT
Bay # 10 - 11	Bay # 10 - 11
Hialeah Gardens, FL 33018	Hialeah Gardens, FL 33018
(The Limited Liability Company cannot serve as its own Registered A another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Marylin Palacios Name 11890 NW 87 CT Bay # 10 - 11 Florida street address (P.O. Box 1)	# 8. L
Hieleah Gardens, FL	33018
City State	Zip
laving been named as registered agent and to accept service of process blace designated in this certificate. I hereby accept the appointment as rewrither agree to comply with the provisions of all statutes relating to the purposition as registered and accept the obligations of my position as registered and accept the obligations of my position as registered agent's (CONTINE	gistered agent and agree to act in this capacity. I proper and complete performance of my duties, and I agent as provided for in Chapter 605, F.S Signature (REQUIRED)
Page 1 o	lpha

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To:18506176383

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	= Authorized Member	Name and Address:
MGR	= Manager	Marylin Palacios 11890 NW 87 CT Bay #10 - 11 Hialeah Gardens, FL 33018
MGR		Lilibeth Harb 11890 NW 87 CT Bay # 10 - 11 Hisleah Gardens, FL 33018
	<u>. </u>	
		
(Use atta	chment if necessary)	
LEV: Eff floctive dan e of filling.) If the date	ective date, if other than the te is listed, the date must b inserted in this block does	e date of filing: 05/04/2015 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed ment of State's records.
LE V: Eff flective date of filing.) If the date ument's ef	ective date, if other than the te is listed, the date must l	not meet the applicable statutory filing requirements, this date will not be listed
LEV: Eff floctive dance of filing.) If the date nument's eff LEVI: Of	ective date, if other than the te is listed, the date must l inserted in this block does fective date on the Depart	not meet the applicable statutory filing requirements, this date will not be listed