

L15000088759

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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W15-21061

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15 MAY -6 AM 11:33  
SECRETARY OF STATE  
HARRISBURG, PENNSYLVANIA

M. MILLIGAN  
EXAMINER

MAY 20 2015

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Guamiquina, 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:

Felix A. Reyes

Name of Person

Guamiquina, LLC

Firm/Company

2607 NW 10th Ave., Apt. 306

Address

Miami, FL 33127

City/State and Zip Code

Guamiquina@hotmail.com

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

For further information concerning this matter, please call:

Felix A. Reyes

Name of Person

at ( 305 ) 498-4372

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2015

FELIX REYES  
2607 NW 10TH AVE, APT. 306  
MIAMI, FL 33127

SUBJECT: GUAMIQUINA, LLC  
Ref. Number: W15000021061

RECEIVED  
15 MAY -6 AM 10:00  
SUNBIZ  
INFORMATION SERVICES

We have received your document for GUAMIQUINA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 9, 2015. Please amend your document accordingly.

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.

Michelle Milligan  
Senior Section Administrator

Letter Number: 915A00006014

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Guamiquina, 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:

2607 NW 10th Ave.

3635 SW 5th Ter

Apt. 306

Miami, FL 33135

Miami, FL 33127

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:

Felix A. Reyes

Name

2607 NW 10th Ave., Apt. 306

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

Miami

FL 33127

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)

15 MAY -6 PM 11:33  
FILED  
CLERK OF DISTRICT COURT  
JANUARY 15, 2015

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Felix A. Reyes

2607 NW 10th Ave., Apt. 306

Miami, FL 33127

MGR

Felix A. Reyes

2607 NW 10th Ave., Apt. 306

Miami, FL 33127

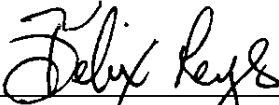
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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:**



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.)

Felix A. Reyes

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  
15 MAY -6 AM 11:33  
DEPARTMENT OF STATE  
HALL OF RECORDS, 1000A