Division of Conjorations



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Division of Corporations Fax Number : (850)617~6381

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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

CONSTRUCTION # MANAGENENT Name of Limited Liability Company GROUP, LLC SUBJECT: CBH

The enclosed Articles of Organization and fee(s) are submitted for filing,

Please return all correspondence concerning this matter to the following:

JOSE A LOSA JA CBH CONST & MGMT GROUP, UC 10876 SW Z4 TR MIAMI FL 33165 CAIBAICONSTRUCTION @ GMAIL. COM E-mail address: (10 be used for future annual report motification)

For further information concerning this matter, please call:

LOSA JA, 786, 729 2770 Area Code Davtime Telephone Number JOSE

Enclosed is a check for the following amount:

\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status

S155.00 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 Tailahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

CEH CONSTRUCTION & MANAGENENT GROUP, ULL (Must end with the words "Limited Liability Company. "L.L.C.," or "LLC.")

# ARTICLE U - Address:

The malling address and street address of the principal office of the Limited Liability Company is:

| Principal Office Address: | Mailing Address: |
|---------------------------|------------------|
| 293 NE 181 ST             | _10876_SW 24 TN_ |
| MIAMI FL 33167.           | MIAMI R. 33/45   |

#### ARTICLE III - Registered Agent, Registered Office. & Registered Agent's Siguature:

(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:



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 occept the appointment as registered agent and agree to act in this copacity. 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 abligadons of my position as registered agent us provided for in

Chapter 505 F.S., Signature (REQUIRED) Rogistered

(CONTINUED)

Page 1 of 2

ARTICLE IV-

"MGR",=Manager

nan

"AMBR" - Authorized Member

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

<u>Tifle:</u>

Name and Address:

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(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 of an exhibitized representative of a member. (In accordance with section 605.0203 (H) (b) Plorida Statutes, the execution of this document constitutes an affirmation-order the penalties of perjury that the facts stated herein are true. I am sware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.(55, F.S.) E A LOSA JA Typed or printed name of signee DSE Filing Fees: S125.00 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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