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15 JUN 17 AM 8:45
U.S. DEPT. OF JUSTICE
FBI - NEW YORK

WMD 6/23

NAME: ESTEBAN FUENTES

ADDRESS: 11324 GRAAND WINTHROP AVE RIVERVIEW FLORIDA 33578

TELEPHONE: 727-641-4052

EMAIL: fuentesfinancialgroup@gmail.com

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FUENTES FINANCIAL SERVICES GROUP 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:

11324 GRAND WINTHROP AVE
RIEDEL W FLORIDA
33578

Mailing Address:

11324 GRAND WINTHROP AVE
RIEDEL W FLORIDA
33578

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:

ESTEBAN FUENTES
Name

11324 GRAND WINTHROP AVE
Florida street address (P.O. Box **NOT** acceptable)
RIEDEL FL 33578
City State 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..

Esteban Fuentes

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

ESTEBAN FUENTES
11324 GRAND WINTHROP AVE
RIVERVIEW FL 33558

(Use attachment if necessary)

15 JUN 17 AM 8:45

ARTICLE V: Effective date, if other than the date of filing: 06/15/2015 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Esteban Fuentes

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.)

ESTEBAN FUENTES

Typed or printed name of signer

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)