

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : CLARA GIRALDO, P.A.  
Account Number : I19990000017  
Phone : (305)485-9300  
Fax Number : (305)485-1098

16 FEB -2 AM 11:52  
FBI MIAMI FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
CONTRERAS LANDSCAPING SERVICES, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

**CLARA GIRALDO P.A.**  
**4080 SW 84 AVENUE SUITE C**  
**MIAMI, FL 33155**  
**PH.: (305) 485-9300**

## Electronic Filing Menu

## Corporate Filing Menu

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(H160000273783)

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**CONTRERAS LANDSCAPING SERVICES, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**CONTRERAS LANDSCAPING SERVICES, LLC.**

**ARTICLE II - ADDRESS**

The principal office of the Limited Liability Company is:

**5120 SW 97 CT  
MIAMI FL, 33165**

The mailing address shall be:

**5120 SW 97 CT  
MIAMI FL, 33165**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

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

**OSCAR CONTRERAS  
5120 SW 97 CT**

**Florida street address ( P.O.BOX NOT acceptable)  
MIAMI FL, 33165  
City, State, and Zip**

**CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300**

16 FEB -2 AM 11:52  
NOTARIES PUBLIC  
STATE OF FLORIDA

(H160000273783)

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..

+ Oscar Contreras  
REGISTERED AGENT'S SIGNATURE

## ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

OSCAR CONTRERAS  
5120 SW 97 CT  
MIAMI FL, 33165

MANAGER

DELSY VILLAGOMEZ  
5120 SW 97 CT  
MIAMI FL, 33165

MANAGER

(An additional article must be added if an effective date is requested)

+ Oscar Contreras  
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.)

OSCAR CONTRERAS

Typed or printed name of signee

CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300