

L16000058649

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.

M.H.C. SERVICES, LLC

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

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ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY

ARTICLE I:

The name of the Limited Liability Company is:

M.H.C. SERVICES, LLC

ARTICLE II:

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

Principal Office Address:

5812 GRANT STREET UNIT C

HOLLYWOOD, FL. 33021

Mailing Address:

5812 GRANT STREET UNIT C

HOLLYWOOD, FL. 33021

ARTICLE III:

Registered Agent

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

LISMARY PEDRAZA DURAN

5812 GRANT STREET UNIT C

HOLLYWOOD, FL. 33021

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

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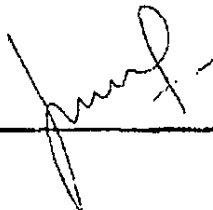
Article IV:

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

Title:	Name & Address:	Percentage:
Manager	LISMARY PEDRAZA DURAN 5812 GRANT STREET UNIT C HOLLYWOOD, FL 33021	100%

In witness whereof, the undersigned subscriber does make, acknowledge and file this certificate for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

DATE:

X 

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

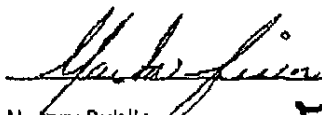
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Before me the undersigned authority, personally appeared to me, known to me to be the individual described in, and who executed the foregoing and who acknowledged before me that the same was executed for the purposes expressed.

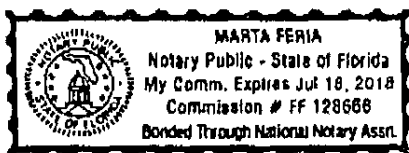
In witness whereof, I have hereunto affixed my had and official seal at Miami-Dade County, Florida.

Date: 3-23-16



Notary Public

State of Florida



My commission expires: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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