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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	SORDADOR A DOMICILIO, LLC
SUBJE	Name of Limited Liability Company
The end	losed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	JOSE A. SUAREZ
	Name of Person
	SORDADOR A DOMICILIO, LLC
	Firm/Company
	15260 SW 80 STREET, APT 12
	Address
	MIAMI, FL 33193
	City/State and Zip Code
	REINERIOHERNANDEZ@GMAIL.COM
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	REINERIO HERNANDEZ 786 291-2105
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
	O Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee. Certified Copy (additional copy is enclosed)}
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301



March 30, 2016

JOSE A. SUAREZ 15260 SW 80 STREET, APT 12 MIAMI, FL 33193

SUBJECT: SORDADOR A DOMICILIO, LLC

Ref. Number: W16000023218

We have received your document for SORDADOR A DOMICILIO, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 716A00006441

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		F
The name of the Limited Liability Company is:	16 AP	'R I
SORDADOR A DOMICILIO, LLC	SECRE	Ta
(Must end with the words "Limited Lial	pility Company, "L.L.C.," or "LLC.")	IAS
ARTICLE II - Address: The mailing address and street address of the principal office Principal Office Address:	of the Limited Liability Company is: Mailing Address:	
The mailing address and street address of the principal office		

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:

JOSE A. SUAREZ	2	
	Name	
15260 SW 80TH S	STREET, APT 12	
Florida street add	ress (P.O. Box <u>NOT</u> ac	cceptable)
MIAMI	FL	33193
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..

(CONTINUED)

Registred Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager MGR	JOSE A. SUAREZ 15260 SW 80 STREET, APT 12 MIAMI, FL 33193	SECRETARY OF ST TALLAHASSEE FLO
	15260 SW 80 STREET, APT 1.	
MGR	15260 SW 80 STREET, APT 1.	
		<u> </u>
	MIAMI, FL 33193	
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fective date is listed, the date must be specific and of filing.) If the date inserted in this block does not meet the aument's effective date on the Department of State'	applicable statutory filing requirer	
LE VI: Other provisions, if any.		
DD VI. Other provisions, it any.		
REQUIRED SIGNATURE:	My	
REQUIRED SIGNATURE: Signature of a member of	an authorized representative o	f a member.
Signature of a member of This document is executed in ac	an authorized representative of cordance with section 605.0203 (1) (b), Florida Statutes.
Signature of a member of This document is executed in ac I am aware that any false informations.	an authorized representative o) (b), Florida Statutes.
Signature of a member of This document is executed in act I am aware that any false informations titutes a third degree felony: IOSE A SUAREZ	an authorized representative of cordance with section 605.0203 (1 ation submitted in a document to the provided for in s.817.155, F.S.) (b), Florida Statutes.
Signature of a member of This document is executed in act I am aware that any false informations titutes a third degree felony: IOSE A SUAREZ	an authorized representative of cordance with section 605.0203 (1 tion submitted in a document to the) (b), Florida Statutes.