

Office Use Only



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05/25/16--01011--030 **160.00



Medical Control

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Alvelo's Electric Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
José I. Alvelo Name of Person Alvelo's Electric
Alvelo's Electric
1416 Warwich Place Address
Orlando, 71 32806 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jose I, Alvelo at (407) 1692-3350 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

is Electric, LLC.

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

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

Principal Office Address:

another business entity with an active Florida registration.)

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

. 411.

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

	N	lame				
	1416 Waru	ich Plac	ce			
	Florida street address (I	P.O. Box NOT acc	eptable)			
	Orlando	71.	32806			
	City	State	Zip			
Having been named as registered ag place designated in this certificate, I further agree to comply with the pro am familiar with and accept the obli	hereby accept the appoin visions of all statutes relating attions of my position as the statute of the control	tment as registered ing to the proper a	agent and agree to act in nd complete performance provided for in Chapter 6	this capacity. of my duties, a	I	,
	(CONTINUED)				
		Page 1 of 2			16 MAY 25 AM	The state of the s

Title: "AMBR" = Auti		Name and Address:
"MGR" = Mana		Jose I. Alvelo
MGB		Orlando, 71, 32806
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