

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000282684 3)))



H160002826843ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6361

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****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.
BONILLA FAMILY SAVINGS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

118433

Electronic Filing Menu

Corporate Filing Menu

Help

③

H16000282684

**Articles of Organization
of
BONILLA FAMILY SAVINGS, LLC**

The undersigned natural person(s), of the age of eighteen years or more, acting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such limited liability company.

Article 1. Name of Limited Liability Company

The name of this limited liability company is BONILLA FAMILY SAVINGS, LLC

Article 2. Registered Office and Registered Agent

The initial registered office of this limited liability company and the name of its initial registered agent at this address are:

The Law Offices of Max A. Adams, Esq., PLLC
2151 S. LEJEUNE ROAD, STE. 306
Coral Gables, FL. 33134

Article 3. Statement of Purposes

The purposes for which this limited liability company is organized are:

ALL LAWFUL BUSINESS

Article 4. Management and Names and Addresses of Initial Manager

This will be a member-managed company. The name and address of each managing member are as follows:

Title: MGR
Name: LORENA BONILLA
Address: 707 MADEIRA AVENUE
CORAL GABLES, FLORIDA 33134

Article 5. Principal Place of Business of the Limited Liability Company

The principal place of business of the limited liability company shall be:

Address: 707 MADEIRA AVENUE
CORAL GABLES, FLORIDA 33134

NOV 15 PM 3:10
FEB 15 2017

Article 6. Period of Duration of the Limited Liability Company

The period of duration of the limited liability company shall be:

"Perpetual"

Article 7. Company Existence

The Company's existence shall begin effective as of November 4, 2016

The authorized members executed these Articles of Organization on November 4, 2016



Max A. Adams, Attorney in Fact

11-4-16
DATE

STATEMENT OF REGISTERED AGENT


LIMITED LIABILITY COMPANY:

BONILLA FAMILY SAVINGS, LLC.

REGISTERED AGENT/OFFICE:

The Law Offices of Max A. Adams, Esq., PLLC
2151 S. LEJEUNE ROAD, STE. 306
Coral Gables, FL. 33134

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



The Medi-Law Firm, by
Max A. Adams, Attorney in Fact

11-4-16
DATE

Registered Agent for
BONILLA FAMILY SAVINGS, LLC

Date: 11-4-16


11/16/2016 13:11 9696339696