3052201440

## L17000 140188

PAGE 01/03

### 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.

(((H17000171043 3)))



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)617-6381

From:

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

<u>::</u>

Email Address:

#### FLORIDA LIMITED LIABILITY CO. **BOSSIS & CAVALLI, LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

3052201440

H17000171043

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	51 - Name: of the Limited Liability Company is: Otus end with the words Limited Liability Company, (C)	
	Bossis & Cavalli, LLC	
ARTICLI The mailir Company	E II - Address:  ng address and street address of the principal office of the Limited Liability	
Company .	3515 NW 14 TH AVE DORAL	
-	770RIDA 33178	
The name Company cor with an activ	EIII - Registered Agent. Registered Office: e and the Florida street address of the registered agent are: (The Limited Liability and serve as its own Registered Agent. You must designate an individual or another business entity the Florida registration.)  ALEXANDER ENRIQUE ESSIS  3515 NW 114 th AVE DORAL FIORIDA 331718	
ARTICL: The name Liability (	e and title of each person authorized to manage and control the Limited Company:	
·	ALEXANDER ENRIQUE ESSIS (AMBR)	
	SECRETARY OF STAINANT OF STAIN	FILED

#17000171043

#### Required Signatures:

X Willander Gran 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree telony as provided for in s.817.155, F.S.

ALEXANDER ENRIQUE ESSIS

Typed or printed name of signee

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 (REQUIRED)

FILED

17 JUN 28 ANIO: 59

SECRETARY OF STATE