L11000211331

(Requestor's Name)	
(Address)	
(8.1/222)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	IL
(D. Janes F. 17), No.	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	ļ
	1

Office Use Only



200304244592

10/13/17--01020--011 **125.00

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: HONZON VIEW WINDOWS, LU. 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:
yaidel L. Almarales Name of Person
HOMZON VIEW WINDOWS, LLC.
3023 W Flagier ST
MIANI FL 33135
MIGNI FL 33135 City/State and Zip Code Gity/State and Zip Code
For further information concerning this matter, please call:
Gardel L. Almarales, 780 302-2008 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Horizon View Windo	WS, LLC.
(Must contain the words "Limited Liability Company, "I	L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:
3023 W Flagrer 5T 300 MIGMI FL 33135 MIG	23 W. FlogrerST
ARTICLE III - Registered Agent, Registered Office. & Registered Agent' (The Limited Liability Company cannot serve as its own Registered Agent. You another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	
yaidel Almarates	19 PM
3023 W Flack (P.O. Box NO) acc	<u>'ST</u> = ;
MICHAIL FL	33135
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)

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Au	thorized Member	Name and Address:
"MGR" = Mar	ager	daldel Almaraks
	<u> </u>	J 3023 W Flagler ST
		MIGHAE FL 331-32
		
<u> </u>		
		
Ulse attachmer	it if necessary)	
CLE V: Effective effective date is litte of filing.)	date, if other than the date of sted, the date must be spe	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days:
CLE V: Effective effective date is little of filing.) If the date inserts ocument's effective	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of	ecific and cannot be more than five business days prior to or 90 days a neet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective effective date is litte of filing.)	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of	ecific and cannot be more than five business days prior to or 90 days a neet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective effective date is little of filing.) If the date inserts ocument's effective	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of	ecific and cannot be more than five business days prior to or 90 days a neet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective effective date is little of filing.) If the date inserts ocument's effective	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any,	ecific and cannot be more than five business days prior to or 90 days a neet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective effective date is linte of filing.) If the date inserted comment's effective CLE VI: Other pro-	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any.	recific and cannot be more than five business days prior to or 90 days a neet the applicable statutory filing requirements, this date will not be list of State's records.
CLE V: Effective effective date is linte of filing.) If the date inserted comment's effective CLE VI: Other pro-	date, if other than the date of sted, the date must be speed in this block does not meed date on the Department of ovisions, if any. Signature of a mei This document is executed am aware that any false	meet the applicable statutory filing requirements, this date will not be list of State's records. The control of the statutory filing requirements, this date will not be list of State's records. The control of the statutory filing requirements, this date will not be list of State's records.
CLE V: Effective effective date is linte of filing.) If the date inserted comment's effective CLE VI: Other pro-	date, if other than the date of sted, the date must be speed in this block does not meed date on the Department of ovisions, if any. Signature of a mei This document is executed am aware that any false	mber or an authorized representative of a member.
CLE V: Effective effective date is linte of filing.) If the date inserted comment's effective CLE VI: Other pro-	date, if other than the date of sted, the date must be speed in this block does not meed date on the Department of ovisions, if any. Signature of a mei This document is executed am aware that any false	inter or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155. F.S.
CLE V: Effective effective date is linte of filing.) If the date inserted comment's effective CLE VI: Other pro-	date, if other than the date of sted, the date must be speed in this block does not meed date on the Department of ovisions, if any. Signature of a mei This document is executed am aware that any false	inter or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155. F.S.
CLE V: Effective effective date is liste of filing.) If the date inserte ocument's effective CLE VI: Other programmer of the programmer o	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of systems, if any. Signature of a mei This document is execute I am aware that any false constitutes a third degree	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155. F.S.

ARTICLE IV-