

# L18000043147

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(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

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(Business Entity Name)

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(Document Number)

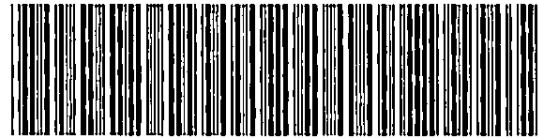
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TALLAHASSEE, FLORIDA  
SOLICITOR GENERAL'S OFFICE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 14, 2018

JORGE ALBERTO SAINZ  
6400 S.W. 92 ST.  
MIAMI, FL 33156

SUBJECT: LOGICAL PUBLISHING TRAINING AND AUDITING CO., L.L.C.  
Ref. Number: W18000014786

We have received your document for LOGICAL PUBLISHING TRAINING AND AUDITING CO., L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

Please return 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.

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 818A00003136

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DEPT OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: New Filing Section  
Division of Corporations

REVISED W18000014786

SUBJECT: LOGICAL PUBLISHING, TRAINING AND AUDITING LLC  
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:

JORGE ALBERTO SAINZ

Name of Person

LOGICAL PUBLISHING TRAINING AND AUDITING LLC

Firm/Company

6400 SW 92<sup>nd</sup> STREET

Address

MIAMI, FL 33156

City/State and Zip Code

JASAINZ@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JORGE A. SAINZ at ( 305 ) 431-5283

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☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)☐ \$160.00 Filing Fee,  
Certificate of Status &  
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

## ARTICLE I - Name:

The name of the Limited Liability Company is:

LOGICAL PUBLISHING TRAINING AND AUDITING LLC

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

## ARTICLE II - Address:

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

Principal Office Address:6400 SW 92<sup>nd</sup> STREET  
MIAMI, FL 33156Mailing Address:6400 SW 92<sup>nd</sup> STREET  
MIAMI, FL 33156

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

JORGE ALBERTO SAINZ  
Name6400 SW 92<sup>nd</sup> STREET  
Florida street address (P.O. Box **NOT** acceptable)MIAMI FL 33156  
City State ZipRECEIVED  
FEBRUARY 19 2018  
TALLAHASSEE, FLORIDA

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LED

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..

JA Sainz

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

\_\_\_\_\_

\_\_\_\_\_

**Name and Address:**

GEORGE JOSEPH SAINZ  
4977 MILANO ST.  
AVE MARIA, FL 34142

TATIANA S. SAINZ-CONKLIN  
9607 SAWYER BEND LANE  
SPRING, TX 77386

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

JA Sainz

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JORGE ALBERTO SAINZ

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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