

L18000045904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900309381549

02/20/18--01009--014 **130.00

FILED
18 FEB 20 PM 1:03
CLERK OF DISTRICT COURT
JANUARY 2018

N CULLIGAN

FEB 22 2018

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FATHER OF SEVEN, 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:

ANTONIO GONZALEZ

Name of Person

GONZALEZ & ASSOCIATES III PA

Firm/Company

8436 W OAKLAND PARK BLVD

Address

SUNRISE, FL 33351

City/State and Zip Code

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

For further information concerning this matter, please call:

ANTONIO GONZALEZ at (954) 773-7286
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:

FATHER OF SEVEN, 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:

14521 SW 38TH STREET

MIRAMAR, FL 33027

Mailing Address:

14521 SW 38TH STREET

MIRAMAR, FL 33027

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 another business entity with an active Florida registration.)

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

GONZALEZ & ASSOCIATES III PA

Name

8436 W OAKLAND PARK BLVD

Florida street address (P.O. Box **NOT** acceptable)

SUNRISE

FL

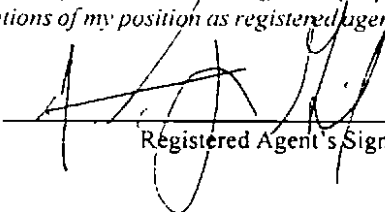
33351

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
18 FEB 20 PM 1:03
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

Name and Address:

ANTONIO JEBIAN

14521 SW 38TH STREET

MIRAMAR, FL 33027

AMBR

MARIA JEBIAN

14521 SW 38TH STREET

AMBR

JACQUELINE J. GARCIA

14521 SW 38TH STREET

AMBR

ISABELLA M. RAMOS

14521 SW 38TH STREET

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

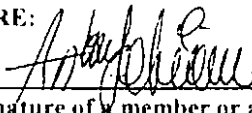
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ANY AND ALL LAWFUL BUSINESS

REQUIRED SIGNATURE:



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.

ANTONIO JEBIAN

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)

FILED
18 FEB 20 PM 1:03
CLERK OF THE COURT
TALLAHASSEE, FLORIDA

ARTICLE IV - Attachment

FATHER OF SEVEN, LLC

Title:	Name and Address
AMBR	PIERRE A. JEBIAN 14521 SW 38 TH STREET MIRAMAR, FL 33027
AMBR	YVONNE M. JEBIAN-AZZE 14521 SW 38 TH STREET MIRAMAR, FL 33027
AMBR	VICTORIA M. JEBIAN 14521 SW 38 TH STREET MIRAMAR, FL 33027
AMBR	JORGE A. JEBIAN 14521 SW 38 TH STREET MIRAMAR, FL 33027
AMBR	PAOLO A. JEBIAN-AZZE 14521 SW 38 TH STREET MIRAMAR, FL 33027

FILED
18 FEB 20 PM 1:03
CLERK OF DISTRICT COURT
FALL ARIZONA