L18000063734

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



03/14/18--01009--013 **125.00





STORETARY OF STATE SURDIA (JASSEE, FLORID)

75:SING HAR I 4 PH IS: 27

FILED

COVER LETTER

TO: New Filing Section **Division of Corporations** arlos ILC . SUBJECT: laine of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. SHOW FRAME IN THE Please return all correspondence concerning this matter to the following: arlos terez J.r. Name of Person Address 32310 lahussee City/State and Zip Code 3137 G Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Trat (941) 549-2318 Area Code Daytime Telephone Number situ ana ci 23 Name of Person Enclosed is a check for the following amount: \$160.00 Filing Fee, \$155.00 Filing Fee & \$130.00 Filing Fee & \$125.00 Filing Fee Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address Mailing Address New Filing Section New Filing Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

NEG WAR I. YO

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company i	is:
---	-----

arlos Perez traming LL

(Must contain the words "Limited Liability Company, L.E.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:	Mailing Address:	
7805 Lariat Court	Bul Attendaus climax rd	
Taulahassee Fl 37310	Climax 4a 39834	

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:

Carlos	Perez Name	Ju
7305 lari Florida street address		
Tallabassee	KI_	32310
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)



ť

• • •

.

. . . .

.

.

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

.

· · · ·

	Title:	Name and Address:			
1	"AMBR" = Authorized Member "MGR" = Manager AICRIM	Carlos Peroz Jr. 7305 Caricy Court Tullahossee Fl 32310		4	9846 s4846 % 349
	· <u>····································</u>				
	. <u> </u>		·····		
	(Use attachment if necessary)				
(If an the da <u>Note:</u> the do	te of filing.) If the date inserted in this block does not meet ocument's effective date on the Department of S	the applicable statutory filing requirements, this date		be listed a	
	REQUIRED SIGNATURE				
	This document is executed 1 am aware that any false in constitutes a third degree for $\left(\begin{array}{c} c \\ c \\ c \end{array} \right) 0 \leq 0$	per or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida formation submitted in a document to the Departmen lony as provided for in s.817.155, F.S. Perce. Jr. Typed or printed name of signee	Statutes. t of State		
	\$125.00 Filing Fee for Articles of Organ \$-30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	<u>Filing Fees:</u> nization and Designation of Registered Agent)	SECRET ALLAHA	2018 MAR	_

.

•