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Division of Corporations

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#### FLORIDA LIMITED LIABILITY CO.

### Monzon/Deus, LLC

Profession and Industrial Section 19 15 and 15 and 16 and 16 and 16	PRESENCE AND PARTY AND PROPERTY OF THE PROPERT
Certificate of Status	0
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MAY 2 2018

# COVER LETTER

то:	Registration Division of C	Section Corporations		
SUBJEC	T: <u>Monzo</u> r	n/Deus, LLC Name of L	imited Liability Company	
The encl	osed Articles	of Organization and fee(s)	are submitted for filing.	
Please re	turn all corre	spondence concerning this	matter to the following:	
	Chevenn	e Moseley	Name of Person	
			Ivanic of 1 cison	
	LegalZoc	om.com, Inc.	Firn√Company	
	<u>101 N. B</u>	rand Blvd, 10th Street	Address	
	Glendale	. CA 91203	City/State and Zip Code	
		galzoom.com E-mail address: (to be us	ed for future annual report notifice	ation)
Cheyen	ne Moseley Nam	at (	323 ) 962-8600 ext 76. Area Code Daytime Te	25 lephone Number
Enclosed	is a check for	the following amount:		
\$125.00	Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	☑S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To: Page 4 of 11

FILED

18 HAY -1 AH 9; 18

ARTICLESOFORGANIZATIO	ON FOR FLORIDALIMITED LIABILITY COMPANY SECRETARY OF STA TALLAHASSEE, FLOR
ARTICLE 1 - Name:	TALLAHASSEE FLOR
The name of the Limited Liability Company is:	
Monzon/Deus LLC	
(Must end with the words "	'Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
480 W 18th Street	490 W 18th Street
Hialeah, FL 33010	<u>Flialean, FL 33010</u>
<u>13302 Winding Oak C</u>	egistered agent are: ation Agents, Inc. Name
Tampa	FL 33612
City  Having been named as registered agent and to a	Zip  Execute a process for the above stated limited liability company at
the place designated in this certificate, I herel capacity. I further agree to comply with the pro	by accept the appointment as registered agent and agree to act in this positions of all statutes relating to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter 605, F.S.
	Cin
	's Signature (REQUIRED)
Ché	Byenne Moseley, United States Corporation Agents, Inc.

Page 1 of 2

Title:	Name and Address:	<u>-</u>
"AMBR" = Authorized Member	_ <del>\</del> <del></del>	シデ
"MGR" = Manager		50.23
MGR	Javier Deus	
· · · · · · · · · · · · · · · · · · ·	480 W 18th Street	
	Hiatoah, FL 33010	71
		i
MGR	Adrian Ruiz	至当
	480 W 18th Street	<u>⇔</u> ~
	Hialeah, FL 33010	7
	THE TOTAL OF THE T	
MGR	Iris Monzon	
	480 W 18th Street	
	Hialeah, FL 33010	
	Tildlean, 1 L 00010	
MGR	Alain Viera	
111011	480 W 18th Street	
	Hialeah, FL 33010	
	maican, rt 33010	
(Use attachment if necessary)  CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.)	e of filing; (OPTIONAL) secific and cannot be more than five business days prior to or 90	9 days aft
CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) CLE VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 90	0 days aft
CLE V: Effective date, if other than the date effective date is listed, the date must be spate of filing.) CLE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90	0 days aft
CLE V: Effective date, if other than the date effective date is listed, the date must be spe of filing.) CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	Decific and cannot be more than five business days prior to or 96	0 days aft
CLE V: Effective date, if other than the date effective date is listed, the date must be spite of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me (in accordance with section 60 constitutes an affirmation under I am aware that any false infor	pecific and cannot be more than five business days prior to or 90	0 days aft
CLE V: Effective date, if other than the date effective date is listed, the date must be spite of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false inforconstitutes a third degree felometer.	ember or an authorized representative of a member.  25.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.  That ion submitted in a document to the Department of State.	0 days aft

Page 2 of 2

### Attachment to

### Articles of Organization for

## Monzon/Deus, LLC

Additional members of the Limited Liability Company are:

Name of Member	Address
Adrian Ruiz	480 W 18th Street, Hialcah, FL 33010
Iris Monzon	480 W 18th Street, Hialeah, FL 33010
Javier Deus	480 W 18th Street, Hinleah, FL 33010
Alain Viera	480 W 18th Street, Hinlenh, FL 33010