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(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2.00.000 2.00)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT OWERD CONCLUENT SELVICES Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for tiling.
Please return all correspondence concerning this matter to the following:
Jacobs Claredo Torres X
Pane of Felson
32 D SUNSET DA
Parama city beach F2 3:2413 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Schero Ovicho at (9.52) 564 5583 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certificate of Status & (additional copy is enclosed)
Mailing Address New Filing Section Street Address New Filing Section
Division of Corporations Division of Corporations

New Filing Section Division of Corporation 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 1 - Name: The name of the Limited Liability Company is:
I Outedo Construction Services LC (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: Mailing Address:
Fanama City brock Fl princh City brach, FL 32413
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: 15.3000 US 30 TONES Name
Florida street address (P.O. Box NOT acceptable) Panama City beach FL 3241 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) 18 NOV 20 PH to 17 All Approximations of Gally (Continued)

Title: "AMBR" = Authorized Member "MGR" = Xlanager	Name and Address: Isidoro Oviedo Torres 32 D Sunset Dr
	Panama City brach, Fl 32413
effective date is listed, the date must be be of filing.)	
CLE V: Effective date, if other than the deffective date is listed, the date must be te of filling.)	specific and cannot be more than five business days prior to or 90 days a of meet the applicable statutory filing requirements, this date will not be list
CLE V: Effective date, if other than the deffective date is listed, the date must be set of filing.) If the date inserted in this block does not cument's effective date on the Department.	specific and cannot be more than five business days prior to or 90 days a of meet the applicable statutory filing requirements, this date will not be listed.
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