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Florida Department of State
Division of Corporations
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Fax Number : (850)617-6381

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**FLORIDA LIMITED LIABILITY CO.
EVELIO GOMEZ LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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SECURITY
INFORMATION

2018 DEC -4 AM 9:01

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DEC 05 2018

Electronic Filing Menu

Corporate Filing Menu

Help

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ATTENTION:

SAME OWNER OF EVELIO GOMEZ, INC
Doc# P98000100947

Florida Department of State
Attention: New Filings Section

To whom it may concern:

This is to advise that the owners of

EVELIO GOMEZ INC

of Document # P980000100947

are the same owners of the attached articles.

Thank you for your help in this matter.

Thanks,

Evelio Gomez

12/04/2018 14:37
850-817-8381

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LAZARUS CORPORATE

PAGE 03/05

12/4/2018 12:06:15 PM PAGE 1/001 Fax Server



December 4, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations
LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: EVELIO GOMEZ LLC
REF: W18000104495

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P98000100947.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

FAX Aud. #: H18000343039
Letter Number: 918A00024804

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "LLC," or "LLC.")*

Evelio Gomez LLC

ARTICLE II - Address:

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

17914 NW 11th
Pembroke Pines FL 33029

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(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.)*

Evelio Gomez
17914 NW 11th
Pembroke Pines, FL 33029

ARTICLE IV-

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

Evelio Gomez
(AMBR)

FILED
2016 DEC -4 AM 9:04
TALLAHASSEE, FL
SOS

Required Signatures:



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

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.

Evelio Gomez

Typed or printed name of signee

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)

EFFECTIVE DATE:

1-1-19