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## FLORIDA LIMITED LIABILITY CO. SOCA & AD LLC

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Help

10/09/2013 04:44 3052737418

PAGE 82/93

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME THE NAME OF THE LIMITED LIABILITY COMPANY IS:

## **SOCA & AD 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 PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS

6453 6<sup>TH</sup> STREET KEY WEST, FL. 33040 6453 6<sup>TH</sup> STREET KEY WEST, FL. 33040

# ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

(The Limited Liability Company cannot serve as it own Registered Agent. You must designate and Individual or another business entity with an active Florida registration)

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

### **JOSE A SOCA**

Name

6453 6TH STREET

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

KEY WEST, FL. 33040

City, State, and 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 certificated, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (Requiered)

13 116 27 PMP: LL

10/09/2013 04:44

PAGE 03/03

PAGE 83/83

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as Follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

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MGR

JOSE A SOCA 6453 6<sup>TE</sup> STREET

**KEY WEST, FL. 33040** 

**MGRM** 

ADELKY HERRERA MARTIN

6453 6TH STREET KEY WEST, FL. 33040

( Use attachment if necessary )

ARTICLE V: EFFECTIVE DATE, IF OTHER THAN THE DATE OF FILLING: 02/26/2019. (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 FILLING.)

REQUIRED SIGNATURE:

STONATURE OR A MEMBER OR AN AUTHORIZED REFRESENTATIVE OF A MEMBER.

( in ascordance with section 505, 606(3), Florida Statetta, the execution of this downward contribute an affirmation under the penalties of peopley that the facts stated herein at true.)

**JOSE A. SOCA** 

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