

L19000097880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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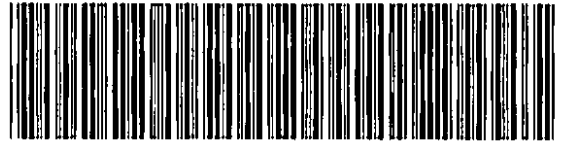
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 08 2019

FILED
19 APR -8 PM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N CULLIGAN

APR 17 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Restoration express LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rafael Figueroa Lugo
Name of Person

Restoration express LLC
Firm/Company

7104 Nw 79 Ave
Address

Tamarac, FL 33321
City/State and Zip Code

rafaellugo669@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rafael Figueroa Lugo at (954) 245-8790
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Restoration express 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:

7104 Nw 79 Ave

Tamarac, FL 33321

7104 Nw 79 Ave

Tamarac, FL 33321

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:

Rafael Figueroa Lugo

Name

7104 Nw 79 Ave

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

Tamarac

City

FL 33321

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..

Rafael Figueroa Lugo
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Rafael Figueroa Lugo

7104 Nw 79 Ave

Tamarac, FL 33321

(Use attachment if necessary)

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JANET M. GORDON

ARTICLE V: Effective date, if other than the date of filing: A.S.A.P. (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 filing.)

ARTICLE VI: Other provisions, if any.

Florida State License # MRSR 3298 mold Remediation
ICRC Water Damage Restoration # 241795

REQUIRED SIGNATURE:

Rafael Figueroa Lugo

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.)

Rafael Figueroa Lugo

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)