

Jul 08 19, 11:52a
7/8/2019

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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : THREE K FAST CARRIER SERVICES INC
Account Number : I20180000033
Phone : (305)805-3516
Fax Number : (305)887-5844

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: ZiannaGranja@yahoo.com

FLORIDA LIMITED LIABILITY CO.
THG REPAIR COLLECTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2019 JUL -8 PM 12:20

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Corporate Filing Menu

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JUL 09 2019

COVER LETTER

(H190002074083)

TO: New Filing Section
Division of Corporations

SUBJECT: THG REPAIR COLLECTION 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:

Last Name
IRIS FQUIJADA LINARES

Name of Person

THG REPAIR COLLECTION LLC

Firm/Company

1810 SW 98TH AVE

Address

MIRAMAR, FL 33025

City/State and Zip Code

ZIANNAGRANJA@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IRIS FQUIJADA LINARES

954

225-3034

at ()

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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

19 JUL - 8 PM 12: 04

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

THG Repair Collection LLC
(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:
1810 SW 98th Ave
MIRAMAR FL 33025Mailing Address:
1810 SW 98th Ave
MIRAMAR FL 33025

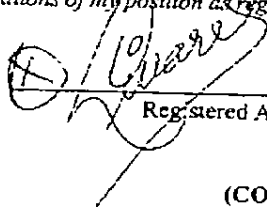
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Eris F. Quijada Linares
Name
1810 SW 98th Ave
Florida street address (P.O. Box **NOT** acceptable)
MIRAMAR, FL 33025
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)

(H190002074083)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGRAMBR**Name and Address:**Iris F. Quijada Linares1810 SW 98th AveMiramar, FL 33025Yasmani Granja Quijada1810 SW 98th AveMiramar, FL 33025

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 7/8/19 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.none**REQUIRED SIGNATURE:**

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Iris F. Quijada Linares

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)

JUL - 8 PM 12: 00
ST. PETERSBURG, FL 33701