

8/9/2019

Division of Corporations

Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
MCABALLERO TOPSMILE, LLC**

Certificate of Status	0
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Page Count	04
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K. PAGE



August 12, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPRESS CORPORATE SERVICES

SUBJECT: MCABAKKERO TOPSMILE LLC
REF: W19000074069

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.

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Marti Simmons
Regulatory Specialist II
New Filing Section

FAX Aud. #: H19000237949
Letter Number: 519A00016529

ARTICLES OF ORGANIZATION**OF****MCaballero TopSmile, LLC****ARTICLE I - NAME**

The name of this Limited Liability Company is:

MCaballero TopSmile, LLC.

ARTICLE II - ADDRESS

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

14964 SW 18 Terr., Miami, FL 33185

ARTICLE III**REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE**

The name and the street address of the registered agent of this Limited Liability Company is:

CARLOS GARCIA, ESQ.

66 West Flagler Street

Suite 401

Miami, FL 33130

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)

ARTICLE IV
MEMBERS AND STREET ADDRESSES

The names and street addresses of the members of this Limited Liability Company:

<u>NAME</u>	<u>STREET ADDRESS</u>
<u>Mariela Caballero Lima</u>	<u>Manager/Managing Member</u>
	<u>14964 SW 18 Terr</u>
	<u>Miami, Florida 33185</u>

ARTICLE V – Effective Date

The Effective date on this Limited Liability Company is:

Date of Filing: August 8th, 2019

ARTICLE VI – Other provisions (if any)

NONE

REQUIRED SIGNATURE:



Mariela Caballero Lima/Manager

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.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of
Organization this 8th day of August 2019.

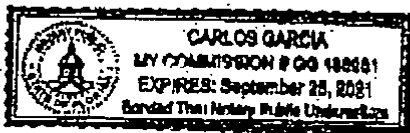


Mariela Caballero Lima

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

BEFORE ME personally appeared to me well known to be the person described in and who executed the foregoing Articles of Organization, and who freely and voluntarily acknowledged before me according to law that he made and executed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal, in the state and county aforesaid, this 8th day of August 2019.





NOTARY PUBLIC, State of Florida



My Commission Expires: