

176381 From: 12143052508 Date: 08/16/19 Time: 2:01 PM Page: 01/04
2/15/2019
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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : 120180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
PALMETTO BAY DEVELOPMENT LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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AUG 20 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Date: August 16, 2019

ARTICLE I – NAME:

The name of the Limited Liability Company is:

PALMETTO BAY DEVELOPMENT, LLC

ARTICLE II – ADDRESS:

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

**9710 E INDIGO ST SUITE 201
PALMETTO BAY, FL 33157**

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

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

RAFAEL LOPEZ

Name

9710 E INDIGO ST SUITE 201

Florida Street Address

PALMETTO BAY, FL 33157

City, State, and Zip

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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 605.0203 (1) (b).

x

Registered Agent's Signature
RAFAEL LOPEZ

ARTICLE IV – MANAGEMENT

The Limited Liability Company is to be considered a multiple members LLC and is therefore a MULTIPLE MEMBER LLC company with multiple managers. The NAME and ADDRESS of initial MANAGERS/ AUTHORIZED MEMBERS are as follows:

<u>Title</u>	<u>Name and Address:</u>
Authorized Member	RAFAEL LOPEZ 9710 E INDIGO ST SUITE 201 PALMETTO BAY, FL 33157

<u>Title</u>	<u>Name and Address:</u>
Authorized Member	MARCELO STOLAREZYK 9041 SW 57 TERRACE MIAMI, FL 33173

<u>Title</u>	<u>Name and Address:</u>
Authorized Member	RICHARD A MUNOZ 5900 SW 73 CT. STE. 208 SOUTH MIAMI, FL 33143

<u>Title</u>	<u>Name and Address:</u>
Authorized Member	WILLIAM CABAN 9710 E INDIGO ST SUITE 201 PALMETTO BAY, FL 33157

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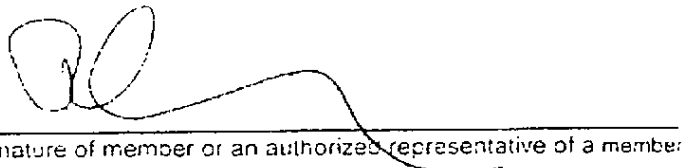
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ARTICLE V BUSINESS DEDUCTIONS

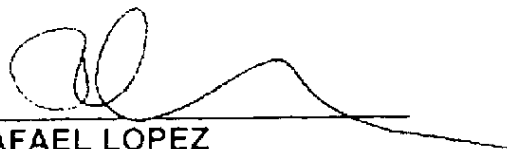
Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

ARTICLE VI – EFFECTIVE DATE

The effective date of the Limited Liability Company shall be. AUGUST 20, 2019.

X 
Signature of member or an authorized representative of a member:
RAFAEL LOPEZ

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.

X 
RAFAEL LOPEZ
Member/Manager of LLC

August 16, 2019

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