

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000327008 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)617-6381 Fax Number

From:

Account Name : E & F LATIN GROUP LLC

S TALLENT

Account Number : I20160003049 Phone : (954) 384-8565

Fax Number : (954)385-5175

NOV 0 6 2019

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

Rmail Address: Office Wet 12tin 2000 mting com

FLORIDA LIMITED LIABILITY CO. THT GLOBAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

	New Fiting Section Division of Corporations		
SUBJEC		imited Liability	Company
The enclo	osed Articles of Organization and fee(s)	are submitted fo	or filing.
Please ret	urn all correspondence concerning this i	natter to the fol	lowing:
	Diego Figueros		
		Name of P	et xon
	E & F LATIN GROUP LLC		3333
		Firm/Com	pany
	1820 N Corporate Lakes Blvd Suite	109	
		Addres	
	Weston, Ff. 33326		
	diego@effathraccounting.com	City/State and	Zip Code
	E-mail address: (to be use	ed for flature an	nual report notification)
l'or further	information concerning this matter, plea	se call:	
	Diego Figueroa at (954)	384 8565
	Name of Person	Area Code	Daytime Telephone Number
Rnclosed	is a check for the following amount:		
\$125.00	Piling Fee S130,00 Piling Fee & Certificate of Status	Certified	Filing Fee & \$160.00 Filing Fcc, Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N D C 2	treet Address ew Filing Section ivision of Corporations lifton Building 66) Executive Center Circle fallahassee, F1, 32301

ARTICLE I - Nume:	t a let a let		
the name of the Limited I	iability Company is:		
THT GLOBAI	LLC		
(Mu:	it contain the words "Limited Li	ability Company,	"L.L.C" or "LLC.")
ARTICLE II - Address:			
The resiling address and s	runt address of the principal offi	ce of the Limited	Liability Company is:
<u>r</u>	rincipal Office Address:		Mailing Address:
1820 N CORP	ORATE LAKES BLVD	1820	N CORPORATE LAKES BLVD
			: 109
Suite 109		Suit	2 109
Weston Fl. 332 ARTICLE III - Registers	ed Agent, Registered Office, &	Wes Registered Age:	ton FL 33326 nt's Signature:
Westivn Ff. 33: ARTICLE III - Registers (The Limited Liability Coranother business entity wi	ed Agent, Registered Office, &	Westered Age: egistered Agent.	ton FL 33326 nt's Signature:
Westivn Ff. 33: ARTICLE III - Registers (The Limited Liability Coranother business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R th an active Florida registration. street address of the registered at LUZ ESPITIA	Westered Age: egistered Agent.	ton FL 33326
Westivn Ff. 33: ARTICLE III - Registers (The Limited Liability Coranother business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R th an active Florida registration. street address of the registered at LUZ ESPITIA	Registered Agent egistered Agent.) gent are:	ton FL 33326 nt's Signature: You must designate an individual o
Westivn Ff. 33: ARTICLE III - Registers (The Limited Liability Coranother business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own Rith an active Florida registration. street address of the registered at LUZ ESPITIA	Registered Age: egistered Agent.) gent are: Name LAKES BLVD S	ton FL 33326 nt's Signature: You must designate an individual o
Westivn Ff. 33: ARTICLE III - Registers (The Limited Liability Coranother business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R th an active Florida registration. street address of the registered at LUZ ESPITIA	Registered Age: egistered Agent.) gent are: Name LAKES BLVD S	ton FL 33326 nt's Signature: You must designate an individual o

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 603, F.S..

(CONTINUED)

2019 NOV -5 PM 1: 05

Title:	Name and Address
"AMBR" = Authorized Member	
"MGR" : Manager	HIANDAND COMPA
MGR	JUAN DAVID GOMEZ 1820 N CORPORATE LAKES BLVD SUITE 109
	WESTON FL 33326
MGR	ANGELA M. LONDONO
MOK	1820 N CORPORATE LAKES BLVD SUITE 109
	WESTON FL 33326
	
() tee etrachment if necessary)	
EV: Effective date, if other than the decive date is listed, the date must be of filing.)	ate of filing: 11.05.2019 specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will no
ective date is listed, the date must be of filing.) (the date inserted in this block does no next's effective date on the Department.)	specific and cannot be more than five business days prior to or 90 struct the applicable statutory filing requirements, this date will no
EV: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does no next's effective date on the Department.	specific and cannot be more than five business days prior to or 90 struct the applicable statutory filing requirements, this date will no
EV: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does no neat's effective date on the Department EVI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not of State's records.
EV: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does no neat's effective date on the Department EVI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not of State's records.
EV: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does no ment's effective date on the Departme EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exert a movement and the provisions.	specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not not of State's records. The prior of State's records. The prior of an authorized representative of a member, cannot in accordance with section 605.0203 (1) (b), Florida Statutes, this information submitted in a document to the Department of State.
EV: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does no ment's effective date on the Departme EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exert a movement and the provisions.	specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not not of State's records. The prior of State's records. The prior of a member of a member of a member of a accordance with section 605.0203 (1) (b), Florida Statutes. The information submitted in a document to the Department of State tree fellony as provided for in s.817.155, F.S.
EV: Effective date, if other than the dective date is listed, the date must be of filing.) the date inserted in this block does no ment's effective date on the Department EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exert am oware that any fit constitutes a third degree.	specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not not of State's records. The prior of State's records. The prior of an authorized representative of a member of state in a document to the Department of State area fellows as provided for in s.817.155, F.S.
EV: Effective date, if other than the discrive date is listed, the date must be of filing.) the date inserted in this block does no neat's effective date on the Departme EVI: Other provisions, if any. REOURED SIGNATURE: Signature of a This document is exert I am aware that any free constitutes a third deg LUZ ESPITIA	specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not not of State's records. The prior of State's records. The prior of a member of a member of a member of a accordance with section 605.0203 (1) (b), Florida Statutes. The information submitted in a document to the Department of State tree fellony as provided for in s.817.155, F.S.