

2/3/2020

**L 20000032820**

Division of Corporations  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

(((H200000385103)))



H200000385103ABCT

**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  
Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : 120000000145  
Phone : (305)444-4994  
Fax Number : (305)444-4977

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

Email Address: \_\_\_\_\_

FILED  
2020 FEB -3 AM 8:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
SIMPLEMENTE MARIA LLC**

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

RECEIVED  
2020 FEB -3 PM 3:50  
CORPORATIONS  
SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

M MOON

FEB 04 2020 -

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**Article I**

The Name of the Limited Liability Company is: **SIMPLEMENTE MARIA LLC.**

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2364 W 56<sup>th</sup> St. Apt. 202, Hialeah, FL 33016.

**Article III**

The mailing address of the Limited Liability Company is:  
2364 W 56<sup>th</sup> St. Apt. 202, Hialeah, FL 33016.

**Article IV**

The name and Florida address of the registered agent is:  
Maria I. Martinez, 2364 W 56<sup>th</sup> St. Apt. 202, Hialeah, FL 33016.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 FEB -3 AM 8:32

FILED

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.

  
\_\_\_\_\_  
Maria I. Martinez

### Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR

Maria I. Martinez


2364 W 56<sup>th</sup> St. Apt. 202, Hialeah, FL 33016.

### Article VI

The contribution of each member is as follows:

Maria I. Martinez	100%
-------------------	------

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

  
\_\_\_\_\_  
Maria I. Martinez

FILED  
2020 FEB -3 AM 8:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA