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TO: Division of Corporations Fax Number : (850)617-6381 From: Account Name : ACCOUNTANT & BUSINESS CONSULTANTS INC 20 FE3 10 Account Number : I20110000083 Phone : (305)705-7922 Fax Number : (786)353-0976 **Enter the email address for this business entity to be used for future FR 1: 24 annual report mailings. Enter only one email address please.** Email Address:_____ 2020 FEB 10 AM 7: 39 FLORIDA LIMITED LIABILITY CO. RECEIVED ALVAREZ TRUST LLC

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2/10/2020

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COVER LETTER

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TO: New Filing Section Division of Corporations

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SUBJECT: ALVAREZ TRUST 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:

VANESSA DURAN

Name of Person

DCC ACCOUNTING

Firm/Company

300 ARAGON AVE SUITE 375

Address

CORAL GABLES FL 33134

City/State and Zip Code

INFO@DCCACCOUNTING.COM

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

For further information concerning this matter, please call:

VANESSA DURAN	305	7057922
	_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		Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed	cd)
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New F	iling Section	New Filing Section D	Pivision	<u> </u>
Divisi	on of Corporations	The Centre of Tallaha	issee	0
	lox 6327 assee, FL 32314	2415 N. Monroe Stre Tallahassee, FL 3230		
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALVAREZ TRUST LLC

(Must conatin 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:	Mailing Address:
1546 <u>2 NW 88 AVE</u>	15462 NW 88 AVE
MIAMI LAKES FL 33018	MIAMI LAKES FL 33018

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:

ALICIA M	ALVAREZ	
	Name	
15462 N	W 88 AVE	
Florida street addres	s (P.O. Box <u>NOT</u> a	cceptable)
MIAMI LAKES	FL	33018
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 oppointment 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)

20 FEB 18 PH 1: 24

E.S.

<u>"itle:</u> AMBR" = Authorized Member MGR" = Manager	Name and Address:
MBR	ALICIA M ALVAREZ 15462 NW 88 AVE MIAMI LAKES FL 33018

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date offiling: <u>02/7/2020</u>. (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.)

<u>Note:</u> 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

REOURED SIGNATURE:

ALVAMEZ, ALICA

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.

ALICIA M ALVAREZ

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) 	
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