Florida Department of State

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CONSTRUCTION & ENGINEERING SCHOOL IN

Account Number : I20170000070

Phone : (305)226-8727

Fax Number : (305)226-8767

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. RF CARPENTRY LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

COVER LETTER

	New Filing Se Division of Co						
SUBJEC	RF Carpe	ntry LLC					
		Nai	ne of Lin	ited Liabi	lity Company		
The enclo	sed Articles o	f Organization and	fee(s) are	submitted	i for filing.		
Please ret	um all corresp	ondence concernin	g this ma	tter to the	following:		
	Lucia Estre	()a					
			•	Name of	Person		
	Constructio	n & Engineering S	chool Inc	:			
				Firm/Co	mpany	-	
	8300 W Fla	gler St Suite 114					
				Addı	ress		
	Miami, Fl 3	33144					
			Çi	ty/State ar	d Zip Code		
		bellsouth.net					
	İ	E-mail address: (to	be used :	for future a	unnual report notificat	tion)	
For further i	information co	nceming this matte	er, please	call:			
	Lucia Estrell	la	30: at (5	226-8727		
	Nam	ne of Person	\	ea Code	Daytime Telephor	ne Number	
Enclosed i	s a check for t	he following amou	nt:				
± \$125.00) Filing Fee	□\$130.00 Filin Certificate of SI	g Fee & atus	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	Certificate of Certificate of Certificate of Certificate of Certificate Certificate Certificate of Certificate	of Status & opy py is enclosed)
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Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	TIC	CLE	1 - 3	Νa	me:

The name of the Limited Liability Company is:

RF Carpentry 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:
15834 NW 10th Street Pembroke Pines, FI 33028	15834 NW 10th ST FEMBROLLE PINES, FC 33028

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:

Mariano C Haire		
	Name	
15834 NW 10th Street	et	
Florida street address	(P.O. Box <u>NOT</u> ac	eceptable)
Pembroke Pines	F!	33028
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 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 Signatur (REQUIRED

(CONTINUED)

2020 HAR -3 PM 3: 41
SECRETARY OF STAT

ARTICLE IV-

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Mariano C Haire
	15834 NW 10th Street
	Pembroke Pines, F1 33028
	· · · · · · · · · · · · · · · · · · ·
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effective date is listed, the date must be to of filing.)	late of filing: March 2, 2020 (OPTIONAL) specific and cannot be more than five business days prior to or 90 days ot meet the applicable statutory filing requirements, this date will not be li
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