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COVER LETTER

	New Filing Section Division of Corporations						
emp nec	HIRM LLC						
SOBJEC	.T:	Name of	Limited Liab	ility Company			
The enclo	osed Articles of	Organization and fee(s) are submitte	ed for filing.			
Please re	turn all correspo	ndence concerning thi	s matter to the	e following:			
	Cam Pardo &	: Michelle Calabrese					
			Name	of Person	· <u>-</u> .		
	Pardo & Mez	zina LLP					
	Firm/Company						
	1317 Paterson Plank Road						
	Address						
	Secaucus NJ	07094					
	juanitageronin	no@gmail.com	City/State	and Zip Code			
	<u> </u>	-mail address: (to be u	ised for futur	e annual report notificat	ion)		
For further	r information cor	neerning this matter, pl	ease call:				
	Juanita Geronimo		917	578-6061			
	Name	e of Person		Daytime Telephor			
Enclosed	l is a check for th	ne following amount:					
■\$125.00 Filing Fee □\$130.00 Filing Fee Certificate of Status		Cert	□\$155.00 Filing Fee & □\$160.00 Filing Fe Certified Copy (additional copy is enclosed) □\$160.00 Filing Fe Certificate of Status Certified Copy (additional copy is enc				
	New Fi Divisio P.O. B	g Address ling Section on of Corporations ox 6327		Street Address New Filing Section Division of Corporat Clifton Building			
Tallahassee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301				

$ARTICLES \, OF \, OR \, GANIZATION \, FOR \, FLORIDA \, LIMITED \, LIABILITY \, COMPANY$

HIRM LLC				
(Must con-	atin the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	iddress of the principal o	ffice of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
2872 Aloma Lake Run			2872 Aloma Lake Run	
Oviedo FL 32765		<u>Ovie</u>	Oviedo FL 32765	
mother business entity with an	active Florida registrational address of the registered	en.)	You must designate an individual or	r
mother business entity with an	active Florida registratio	en.)	You must designate an individual or	r
(The Limited Liability Company another business entity with an The name and the Florida street	active Florida registrational address of the registered Juanita Geronimo 2872 Aloma Lake Ru	n.) Lagent are: Name		r
another business entity with an	active Florida registration address of the registered Juanita Geronimo	n.) Lagent are: Name		r
mother business entity with an	active Florida registrational address of the registered Juanita Geronimo 2872 Aloma Lake Ru	n.) Lagent are: Name	cceptable) 32765	r
another business entity with an	active Florida registrational address of the registered Juanita Geronimo 2872 Aloma Lake Ru Florida street addres	n.) I agent are: Name In s (P.O. Box NOT a	cceptable)	r

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Membe	r
"MGR" = Manager	
AMBR	Juanita Geronimo
	2872 Aloma Lake Run Oviedo FL 32765
	OVICIO FT. 32703
AMBB	Mario Gaerlan
AMBR	2872 Aloma Lake Run
	Oviedo FL 32765
	•
	
(Use attachment if necessary)	
•	
ARTICLE V: Effective date, if other than	the date of filing: (OPTIONAL)
	ust be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	oes not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Dep	partment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	η_{A}
, A	armi
	e of a member or an authorized representative of a member.
	is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	any false information submitted in a document to the Department of State
constitutes a thi	rd degree felony as provided for in s.817.155, F.S.
lumnita (Geronimo
<u>Juanta y</u>	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)