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To:

Division of Corporations

Fax Number : (850)617-6381

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone : (305)552-5973

Fax Number : (305)675-5944

**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. HERNANDEZ ELECTRIC SERVICE AND REPAIR, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Hernandez Clectric Gerrice and Repair, 110
ADTICLE IL ALL
The mailing address and street address of the principal office of the Limited Liability
Company is:
100 H DW 226 St Plami FC 33170 = \$
ARTICLE III - Registered Agent, Registered Office:
The haine and the Fiorida street address of the registered agent are the continuous
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
Pratael Martinez Herrandez
10817 SW 226 ST
MIAMI FL 33170
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
RAFAEL MARTINEZ HERNANDEZ
(AMBR)

Required Signatures:

3052201440

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

RAFAEL MARTINEZ HERNANDEZ
Typed or printed name of signee

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 695, F.S..

Registered Agent's Signature (REQUIRED)