7/16/2020

Division of Corporations

## Florida Departm

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Division of Corporations

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Emp()	Address:			
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## FLORIDA LIMITED LIABILITY CO. OMA MARTINEZ SERVICES LLC.

Certificate of Status	0
Certified Copy	1
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Estimat <del>e</del> d Charge	\$155.00

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21 7026

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Oma Martinez Services LLC.  (Must contain 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:	
Apto Of Hislenh Gordens.  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 emity with an active Florida registration.)	2022 102 17
The name and the Florida street address of the registered agent are:  Avel 4 (2000)  Name	1 S: 5: 5
4688 SID 137 AJE	2
Florida street address (P.O. Box NOT acceptable)	
Male +1 03170:	
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 complute performance of my duties, and I am familiar with and accept the obligations of my position is registered agents as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

Title: "AMBR" = Authorized M	ember	Name and Address:
*MGR" = Manager 11.5 R		Omarys Hortinez 8199 1198 Jeth AVI APA L Halian Collidor, PC 33019
		iliny: (OPTIONAL)
EV: Effective date, if other ective date is listed, the date of filling.)	er than the date of i	iling: (OPTIONAL)  c and cannot be more than five business days prior to or
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