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# **COVER LETTER**

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	Kew Filing Sec Division of Co					
SUBJECT		y Soultions, LLC				
30Barc		Nai	ne of Lin	ited Liabil	ty Company	
The enclose	sed Articles of	Organization and	fee(s) arc	submitted	for filing.	
Please retu	arn all correspo	ondence concernir	ig this ma	tter to the f	ollowing:	
	MARIA E A	REVALO				
				Name of	Person	<del></del>
				72. (6)	·	<u> </u>
				Firm/Co	mpany	
	8456 DUNH	AM STATION D	R			
				Addr	ess	-
	TAMPA, FL	. 33647				
			C	ity/State an	d Zip Code	
	MYPROS94@	gmail.com				
	i	E-mail address: (to	be used	for future a	nnual report notificati	ion)
For further	information co	ncerning this matt	er, please	call:		
	MARIA E A	REVALO	28 at (	ì	6352467	
	Nam	e of Person		ea Code	Daytime Telephon	e Number
Enclosed i	is a check for t	he following amou	mt:			
□\$125.00	) Filing Fee	□\$130.00 Filin Certificate of S		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailin</u>	g Address			Street Address	
		iling Section			New Filing Section Di	
	Divisio	on of Corporation			The Centre of Tallah:	issee

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

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SECKETARY OF S

KE PROPERTY SOLUTIONS, 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:

<u></u>	ncipal Office Address:		Mailing Address:
8456 DUNHAM	STATION DR	845	6 DUNHAM STATION DR
TAMPA FL 3364	47	TA	MPA FL 33647
The Limited Liability Comp nother business entity with	an active Florida registration	Registered Agent. on.)	ent's Signature: You must designate an individual or
he name and the Florida str	reet address of the registered	J	
he name and the Florida str	reet address of the registered  MARIA E AREVAL	J	<del></del>
he name and the Florida str	v	O Name TION DR	acceptable)
The name and the Florida str	MARIA E AREVAL 8456 DUNHAM STA	O Name TION DR	acceptable)

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 Signature (REQUIRED)

(CONTINUED)

## ARTICLE IV-

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

"MCD" = Manager	ber	
"MGR" = Manager <u>MGR</u>	8456	MARIA E AREVALO DUNHAM STATION DR TAMPA FL 33647
		SEORET 1
		AF STEAT
(Use attachment if necessary		
HULE V: Ellective date, if other t		filing: <u>07/28/2020</u> (OPTIONAL)
an effective date is listed, the date date of filing.) te: If the date inserted in this bloc	k does not mee	Tic and cannot be more than five business days prior to or 90 days the applicable statutory filing requirements, this date will not be lisselist factories.
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on effective date is listed, the date date of filing.) te: If the date inserted in this block document's effective date on the I	k does not mee Department of S	t the applicable statutory filing requirements, this date will not be lis State's records.
nn effective date is listed, the date date of filing.) te: If the date inserted in this bloc document's effective date on the ITICLE VI: Other provisions, if any  REQUIRED SIGNATURE  Signat This docume I am aware the	t does not mee Department of S : : : : : : : : : : : : : : : : : : :	t the applicable statutory filing requirements, this date will not be lis

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)