

8/25/2020

Division of Corporations

L20000252001
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000294544 3))



H200002945443ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORPOLICENSE, INC
Account Number : I20050600118
Phone : (305)774-9606
Fax Number : (305)774-9660

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: I.VOLUIS_17@hotmail.com

FLORIDA LIMITED LIABILITY CO.
TITO'S BEST SERVICES, LLC

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

2020 AUG 25 PM 4: 08
2020 AUG 25 PM 4: 05
RECEIVED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION SERVICES

H 20000294544

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
OF
TITO'S BEST SERVICES, LLC**

ARTICLE I - NAME:

The name of the Limited Liability Company is:

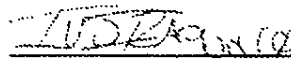
TITO'S BEST SERVICES, LLC

ARTICLE II - ADDRESS:

The mailing and principal address of the Limited Liability Company is:

**251 SW 18th Court, Apt 1
Miami, FL 33135**

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:



**Ivó L. Izaguirre
251 SW 18th Court, Apt 1
Miami, FL 33135**

2020 AUG 25 PM 4: 08
STATE
FLORIDA
SECRETARY OF STATE

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.

H 20000294544

H20000 294544

ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>TITLE:</u>	<u>NAME AND ADDRESS</u>
AMBR	Ivo L. Izaguirre 251 SW 18 th Court, Apt 1 Miami, FL 33135

Ivo L. Izaguirre
 Ivo L. Izaguirre
 251 SW 18th Court, Apt 1
 Miami, FL 33135

(In accordance with section 605.0201, Florida Statutes,
The execution of this document constitutes an affirmation under
The penalties of perjury that the facts stated herein are true)

2020 AUG 25 PM 4: 08
FILED
TALLAHASSEE, FL
CLERK OF THE CIRCUIT COURT

H20000 294544