

L20000255939

<https://file.sunbiz.org/scripts/efilecovr.ex>

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.

(((H20000298798 3)))



H200002987983ABCC

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 : CLARA GIRALDO ENROLLED AGENT
Account Number : 119990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

****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.
TONGA REYNO MMA, LLC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
2020 AUG 27 PM 4:32
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

FILED

2020 AUG 27 AM 9:47

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

TONGA REYNO MMA, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

TONGA REYNO MMA, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**6055 NW 105TH CT #817
DORAL, FL. 33178**

The mailing address shall be:

**6055 NW 105TH CT #817
DORAL, FL. 33178**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

GASTON REYNO

6055 NW 105TH CT #817
Florida Street address (P.O.BOX NOT acceptable)
DORAL, FL. 33178
City, State, and Zip

FILED
2020 AUG 27 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G R

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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**GASTON REYNO
6055 NW 105TH CT #817
DORAL, FL. 33178**

MANAGER



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.)

GASTON REYNO

Typed or printed name of signee

2020 AUG 27 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED