L20000300174

(Requ	estor's Name)	
(Addie	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone a	¥)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Name	;)
(Docu	ment Number)	
Cenified Copies	Certificates o	of Status
Special Instructions to Fili	ng Officer	

Office Use Only



100352716901

10/02/20--01019--001 **130.00



7070 OCT -2 AM 8: 3

C RICO 001 ... 2020

TO: New Filin Division o	g Section f Corporations	. COVER L	ETTER	
	UCK LEASING LLC			
	Name	of Limited Lia	bility Company	
The enclosed Article	s of Organization and fee	c(s) are submitt	ed for filing.	
Please return all corre	spondence concerning the	nis matter to th	e following:	
		VANESSA	TORRES	
		Name o	of Person	
	ALL.	AMERICAN (ERMITS LLC	
		Firm/C	ompany	
	6801 N	V 77TH AVE	SUITE # 103	
		Add	ress	
		МІАМ	I FL 33166	
		City/State an PERMITS2009	d Zip Code O@LIVE.COM	
	E-mail address: (to be us	sed for future a	nnual report notificat	ion)
For further information co	oncerning this matter, ple	ase call:	, and an early	10117
VANESSA	TORRES	305	5014791	
Nam	e of Person	Area Code) Daytime Telephon	e Number
Enclosed is a check for t	he following amount:			
□S125.00 Filing Fee	S130.00 Filing Fee Certificate of Status	& □S155 Certifie	.00 Filing Fee & d Copy	□\$160.00 Filing Fee, Certificate of Status &

Mailing Address

For

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

(additional copy is enclosed)

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

Certified Copy

(additional copy is enclosed)

1 audia 850 322 7898

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Principal Office Address: 2824 29TH AVE NE NAPLES FL 34120 RTICLE III - Registered Agent, Registered Office, & Registered Agent Che Limited Liability Company cannot serve as its own Registered Agent. You have business entity with an active Florida registered agent are: JOSUE FELIX Name	GLLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Principal Office Address: 2824 29TH AVE NE NAPLES FL 34120 ARTICLE III - Registered Agent, Registered Office, & Registered Agent File Limited Liability Company cannot serve as its own Registered Agent. You have business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: JOSUE FELIX Name	V." C " o= "I C "
2824 29TH AVE NE NAPLES FL 34120 ARTICLE III - Registered Agent, Registered Office, & Registered Agent The Limited Liability Company cannot serve as its own Registered Agent. You nother business entity with an active Florida registration.) he name and the Florida street address of the registered agent are: JOSUE FELIX Name	- Section of "LLC.")
2824 29TH AVE NE NAPLES FL 34120 ARTICLE III - Registered Agent, Registered Office, & Registered Agent The Limited Liability Company cannot serve as its own Registered Agent. You nother business entity with an active Florida registration.) he name and the Florida street address of the registered agent are: JOSUE FELIX Name	d Liability Company in
2824 29TH AVE NE NAPLES FL 34120 ARTICLE III - Registered Agent, Registered Office, & Registered Agent Inother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: JOSUE FELIX Name	y company is.
ARTICLE III - Registered Agent, Registered Office, & Registered Agent The Limited Liability Company cannot serve as its own Registered Agent. You inother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: JOSUE FELIX Name	Mailing Address:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent The Limited Liability Company cannot serve as its own Registered Agent. Y Inother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: JOSUE FELIX Name	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent. You The Limited Liability Company cannot serve as its own Registered Agent. You make the service of the registeration.) The name and the Florida street address of the registered agent are: JOSUE FELIX Name	4 29TH AVE NE PLES FL 34120
the name and the Florida street address of the registered agent are: JOSUE FELIX Name	
JOSUE FELIX Name	You must designate an individual or
Name	2020 OC
2824 29TH AVE NE	<u>₹</u> >
Florida street address (P.O. Box NOT acc	''
<u>NAPLES</u> FL	reptable)
City State	reptable) ## ## ## ## ## ## ## ## ## ## ## ## ##
ving been named as registered agent and to accept service of process for the accept service of process for the accept the appointment as registered.	reptable) A A C

Having been named as registered agent and to accep riaving oven 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 turther 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 Signature (REQUIRED)

(CONTINUED)

	· person	authorized to manage and control the Limited Liability Company:
	Title:	Company:
		Name and Address:
	"MGR" = Manager	
	AMBR	1000
		JOSUE FELIX
		2824 29TH AVE NE NAPLES FL 34120
		27720
		
(Use attachment if necessary)	
	Use attachment if necessary)	
ARTICLE	V. Effective data is a	of filing: 09/20/2020
ARTICLE	V. Effective data is a	of filing: 09/29/2020 (OPTIONAL)
ARTICLE If an effect he date of	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.)	of filing: <u>09/29/2020</u> . (OPTIONAL) rific and cannot be more than five business days prior to or 90 days after
ARTICLE (If an effective date of Note: If the	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.)	days after
ARTICLE (If an effective date of Note: If the	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.)	days after
ARTICLE (If an effect the date of <u>Note:</u> If the the docum	V: Effective date, if other than the date of the date is listed, the date must be specifiling.) The date inserted in this block does not meet the date inserted in the Department of	days after
ARTICLE (If an effect the date of Note: If the the docum	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.)	days after
ARTICLE (If an effect the date of Note: If the the docum	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) ne date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	days after
ARTICLE (If an effect the date of Note: If the the docum	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	eet the applicable statutory filing requirements, this date will not be listed as State's records.
ARTICLE (If an effect the date of <u>Note:</u> If the the docum	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	days after
ARTICLE (If an effect the date of Note: If to the docum	V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) in date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	eet the applicable statutory filing requirements, this date will not be listed as State's records.
ARTICLE (If an effect the date of Note: If to the docum	EV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	eet the applicable statutory filing requirements, this date will not be listed as State's records.
ARTICLE (If an effect the date of Note: If to the docum	EV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	eet the applicable statutory filing requirements, this date will not be listed as State's records.
ARTICLE (If an effect the date of Note: If the the docum	EV: Effective date, if other than the date of the date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any. EOUIRED SIGNATURE:	et the applicable statutory filing requirements, this date will not be listed a State's records.
ARTICLE (If an effect the date of Note: If the the docum	EV: Effective date, if other than the date of the date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a mem This document is executed	ber or an authorized representative of a member.
ARTICLE If an effect he date of Note: If the the docum	EV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a mem This document is executed I am aware that any false in	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b). Florida Statutes.
ARTICLE If an effect he date of Note: If the the docum	EV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a mem This document is executed I am aware that any false in	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b). Florida Statutes.
ARTICLE (If an effective date of Note: If the the docum	EV: Effective date, if other than the date of tive date is listed, the date must be specifiling.) The date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a mem This document is executed I am aware that any false in	ber or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes, iformation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
ARTICLE (If an effect the date of Note: If the the docum	EOUIRED SIGNATURE: Signature of a memina may false in constitutes a third degree for constitutes a third degree for constitutes a third degree for the street of the constitutes a third degree for the street of the constitutes a third degree for the street of the constitutes a third degree for the street of the constitutes a third degree for the constitutes at the constitute	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes.

. . . .

ARTICLE IV.

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)