10/26/2020



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.

(((H20000371779 3)))



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 : E & F LATIN GROUP LLC

Account Number : 120160000049 Phone : (954)384-8565 Fax Number : (954)385-5175

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. SAINT GU LLC

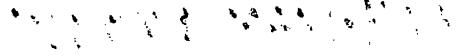
Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

J. FASON

OCT 28 2020

Electronic Filing Menu Corporate Filing Menu

Help



COVER LI	ETTER
TO: New Filing Section Division of Corporations	
SUBJECT: SAINT GU LLC	
Name of Limited Lin	ability Company
The enclosed Articles of Organization and fee(s) are submit	ted for filing.
Please return all correspondence concerning this matter to the	ne following:
DIEGO FIGUEROA	
Name	of Person
E & F LATIN GROUP LLC	
Firm	Company
1820 N CORPORATE LAKES BLVD SUITE	109
Ac	ldress
WESTON FL 33326	
.	and Zip Code
DIEGO@EFLATINACCOUNTING.COM E-mail address: (to be used for futur	a ample report notification)
·	e smust report nounestion)
For further information concerning this matter, please call:	
DIEGO FIGUEROA at (954	384 8565
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status Cert	155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations P.O. Boy 6327	Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

Tallahassee, FL 32303

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

SAINT GU LLC

WESTON FL 33331

(Must conatin 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:

Princ	inal	Office	Add	ress
FISHE	IVAL	Ullice	Auu	1 (23)

Malling Address:

2665 EXECUTIVE PARK DR SUITE 2

2665 EXECUTIVE PARK DR

SUITE 2

WESTON FL 33331

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

(The Limited Limbility Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

E & F LATIN GROUP LLC

Name

1820 N CORPORATE LAKES BLVD SUITE 109

Florida street address (P.O. Box NOT acceptable)

WESTON

FL

33326

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 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..

Reginered Agent's Signature (REQUI

(CONTINUED)

2020 OCT 27 AM II: 40

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	GUSTAVO RODOLFO SERRANO 2665 EXECUTIVE PARK DR SUITE 2 WESTON FL 33331
(Use attachment if necessary)	
fective date is listed, the date must be of filing.)	ate of filing: 10/26/2020 (OPTIONAL) specific and cannot be more than five business days prior to or 90 days of meet the applicable statutory filing requirements, this date will not be light of State's records.
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