

**120000333836**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

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

**From:**

Account Name : GASTESI & ASSOCIATES, PA  
Account Number : 120160000070  
Phone : (305)818-9993  
Fax Number : (305)818-9997

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

Email Address: RAULPAREDES@AOL.COM

**FLORIDA LIMITED LIABILITY CO.  
BIANCA MAR, LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

J. FASON

OCT 30 2020

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## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: BIANCA MAR, LLC.

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAUL J. PAREDES

\_\_\_\_\_  
Name of Person

BIANCA MAR, LLC.

\_\_\_\_\_  
Firm/Company

11850 SW 69 AVE

\_\_\_\_\_  
Address

MIAMI, FL 33156

\_\_\_\_\_  
City/State and Zip Code

RAULPAREDES@AOL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAUL J. PAREDES

305

282-2015

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address

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

Street Address

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

BIANCA MAR, 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:

Principal Office Address:Mailing Address:11850 SW 69 AVE.11850 SW 69 AVE.MIAMI, FL 33156MIAMI, FL 33156

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

(The Limited Liability 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:

RAUL GASTESI

Name


8105 NW 155 STREETFlorida street address (P.O. Box **NOT** acceptable)MIAMI LAKESFL33016

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.*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

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