2020-12-08 15:52:07 GMT

13053284774

From: Yanet Avila

12/8/2020



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.

(((H20000418859 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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994

Fax Number : (305)444-4977

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

 Address:			
 namerss:			

FLORIDA LIMITED LIABILITY CO. GOLDEN TRUST HOLDINGS, LLC

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

J. FASON DEC 0 9 2020

Electronic Filing Menu

Corporate Filing Menu

Help

GOLDEN TRUST HOLDINGS, 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:
8400 NW 30 TER	8400 NW 30 TER
DORAL, FL 33122	DORAL, FL 33122

ARTICLE III - Registered Agent, Registered Office, & 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:

ISMAR L. HERRE	K.4	
	Nume	
8400 NW 30 TER		
Florida street addre	ess (P.O. Box <u>NOT</u> ac	cceptable)
DORAL	Fl.	33122
City	State	71:5

Having been named as registered ogent 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.

| /a/ (Samar L Herrera | Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 DEC -8 PM 12: 45



ΛR	ľľ	Çi	LF.	IV	•
----	----	----	-----	----	---

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address;	
"AMBR" = Authori		
"MGR" = Manager		
MGR	JOSE E. GONZALEZ	
	8400 NW 30 TER	
	DORAL, FL 33122	
MGR	ISMAR L. HERRERA	
MOR	8400 NW 30 TER	
	DORAL, FL 33122	
(If an effective date is listed, the date of filing.) Note: If the date inserted in	this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	
ARTICLE VI: Other provision	ons, if any.	
<u>REQUIRED</u> SIGN	VATURE:	
1.	1 One Franchia	
/	Signature of a member or adouthorized representative of a member.	
an :	Signature of a member or adduthorized representative of a member, is document is executed in accordance with section 605.0203 (1) (b). Florida Statutes.	
	n aware that any talse information submitted in a document to the Department of State	
1 iiii	istitutes a third degree felony as provided for in s.817.155, F.S.	
Con	manifes a since magnes retory on processors for the 2011 (1122) 1 (2))(
	JOSE E. GONZALIEZ)26
	Typed or printed name of signee	5
		Ξ

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)

C-8 PH 12:49

