

12/14/2020

Division of Corporations

L20000384947

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.

(((H20000426247 3)))



H200004262473ABC.

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 : ANTONIO ALONSO, PLLC.
Account Number : I20160000045
Phone : (305)606-0399
Fax Number : (305)508-6364

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

Email Address: alonsoa@aapalaw.com

FLORIDA LIMITED LIABILITY CO.
Estuario, LLC.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2020 DEC 14 PM 1:00

Electronic Filing Menu

Corporate Filing Menu

Help

Derrick Thompson
12/13/20

H120000426247 3

**ARTICLES OF ORGANIZATION OF
Estuario, LLC.**

The undersigned, being authorized to execute and file these Articles, hereby certifies

that:

ARTICLE I -Name:

The name of the Limited Liability Company is:

Estuario, LLC.

ARTICLE II -Address:

The initial mailing address and street address of the principal office of the Limited Liability Company is:

113 SOUTH 8TH ST
FERNANDINA BEACH, FL 32034

ARTICLE III -Registered Agent and Registered Office

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

CARLOS CONRADO ABACA
113 SOUTH 8TH ST
FERNANDINA BEACH, FL 32034

ARTICLE IV - Managers

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

Title

Name and Address

Manager

CARLOS CONRADO ABACA
113 SOUTH 8TH ST.
FERNANDINA BEACH, FL 32034

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 10 day of December, 2020.

Name: **CARLOS CONRADO ABACA**

H120000426247 3

1120000426247 3

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)


Name: CARLOS CONRADO ABACA

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)

Signature of Registered Agent


CARLOS CONRADO ABACA

1120000426247 3