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(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	





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COVER LETTER

	iew ruing Se Division of Co			
SUBJECT	Cosmetrav	rel LLC		
		Name of Lim	ited Liability Company	
The enclos	sed Articles of	f Organization and fee(s) are	submitted for filing.	
Please retu	ırn all corresp	ondence concerning this ma	tter to the following:	
	Jesus Alber	to Alvarez		
			Name of Person	
	Cosmetrave	ILLC		
			Firm/Company	
	3010 Savos	a Ave, Apt E202		
			Address	
	Kissimmee.	FL 34741		
	jesus_alvarez	Ci 2_17@hotmail.com	ty/State and Zip Code	
•		E-mail address: (to be used	for future annual report notificat	ion)
For further i	nformation ec	oncerning this matter, please	call:	
	Jesus Alberte	o Alvarez at (720, 5488	999
	Nan	ne of Person Ar	ea Code Daytime Telephon	e Number
Enclosed is	s a check for t	he following amount:		
■ \$125.00	Filing Fee	□S130.00 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)
	Mailir	ng Address	Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Cosmetravel LLC	<u> </u>					
(Must con	atin the words "Limited L	iability Cor	npany, "L.L.C.," or "LLC.")	!		
ARTICLE II - Address: The mailing address and street a	address of the principal of	fice of the L	Limited Liability Company is	s:		
Princip	pal Office Address:		Mailing A	ddress:		
3010 Savosa Ave, Apt E202 Kissimmee, FL 3474		3474	3010 Savosa Ave, Apt E	202 Kissimmee,		
ARTICLE III - Registered Ag	gent, Registered Office, &	& Registere	FL 34741 ed Agent's Signature:	n individual or	- -	
The Limited Liability Company mother business entity with an	y cannot serve as its own l active Florida registration	Registered A	ed Agent's Signature:	n individual or	2020 DE	
The Limited Liability Company nother business entity with an	y cannot serve as its own l active Florida registration	Registered An.) agent are:	ed Agent's Signature:	n individual or	2020 DEC -	
The Limited Liability Company nother business entity with an	y cannot serve as its own lactive Florida registration address of the registered	Registered An.) agent are:	ed Agent's Signature:	n individual or	+-	
The Limited Liability Company nother business entity with an	y cannot serve as its own lactive Florida registration address of the registered	Registered An.) agent are: Name	ed Agent's Signature:	n individual or	+-	
The Limited Liability Company unother business entity with an	y cannot serve as its own lactive Florida registration address of the registered Jesus Alberto Alvarez	Registered An.) agent are: Name	ed Agent's Signature: Agent. You must designate a	n individual or	+-	47
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own lactive Florida registration address of the registered Jesus Alberto Alvarez 3010 Savosa Ave, Ap	Registered An.) agent are: Name	ed Agent's Signature: Agent. You must designate a	n individual or	2020 DEC -4 AM 10: 05	

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)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Jesus Alberto Alvarez
	3010 Savosa Ave, Apt E202 Kissimmee, FL 34741
(Use attachment if necessary)	
TICLE V: Effective date, if other than the date of fi	ling: (OPTIONAL)
an effective date is listed, the date must be specifidate of filing.)	c and cannot be more than five business days prior to or 90 days after
	the applicable statutory filing requirements, this date will not be listed as tate's records.
TICLE VI: Other provisions, if any.	
	
PROUIDED CLCV , TUBE	
<u>REOUIRED</u> SIGNATURE:	
Signature of a member	for an authorized representative of a member.
This document is executed in	n accordance with section 605,0203 (1) (b). Florida Statutes
I am aware that any false info	frmation submitted in a document to the Department of State ony as provided for in s.817,155, F.S.
Jesus Alberto Alvarez	
Т.	ped or printed name of signee

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)