

Division of Corporations Electronic Filing Cover Sheet

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(((H21000021400 3)))



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To:

Division of Corporations

: (850)617-6381

From:

Account Name : H & R TAX ADVISORS LLC

Account Number : I2020000057 : (786)857-6652

Fax Number : (786)204-3320

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

Email Address:____jannett@hrtaxadvisors.com

FLORIDA LIMITED LIABILITY CO.

Terra Vistahermosa LLC

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J. FASON

JAN 19 2021

Electronic Filing Menu Corporate Filing Menu

Help

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COVER LETTER

	ew Filing Sectivision of Con				
SUBJECT		ihermosa LLC			
SUBJECT	<u></u>	Nan	ne of Limited Lia	bility Company	- , ·
The enclos	sed Articles of	Organization and	fee(s) are submit	ted for filing.	
Please retu	ım all correspo	ondence concernin	g this matter to th	e following:	
	Jannett A Ro	ndriguez			
			Name	of Person	
	H&R Tax A	dvisors LLC			
			Firm	Company	
	12741 SW 3	88 Ter			
			A	ddress	
	Miami, FL 3	33175			
			City/State	and Zip Code	
		xadvisors.com	harmad Can Guar	re annual report notifica	uion\
				re annuar report notifica	mon)
For further i	nformation co	nceming this matte	er, please call:		
	Jannett A Ro	driguez	786 at (857-6252	
	Nan	ne of Person	Area Code	Daytime Telepho	one Number
Enclosed i	s a check for t	he following amou	ınt:		
	Filing Fee	□\$130.00 Filin Certificate of S	g Fee & Status Cer	155.00 Filing Fee & tified Copy ional copy is enclosed)	☐\$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address		Street Address	o
		Filing Section on of Corporations		New Filing Section I The Centre of Tallal	
		Box 6327	•	2415 N. Monroe Su	
	Tallah	assee, FL 32314		Tallahassee, FL 323	303

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ARTICLE I - Name:			
The name of the Limited Lia	bility Company is:		•
Terra Vistahermo			
- (Must c	ontain the words "Limited	Liability Company	, "L.L.C" or "LLC.")
ARTICLE II - Address:			
The mailing address and stree	et address of the principal o	office of the Limited	I Liability Company is:
<u>Prin</u>	cipal Office Address:		Mailing Address:
12741 SW 38 Tea	•	127	41 SW 38 Ter
Miami, FL 33175 ARTICLE III - Registered. The Limited Liability Comp	Agent, Registered Office, any cannot serve as its own	& Registered Age	mi, FL 33175
Miami, FL 33175	Agent, Registered Office, any cannot serve as its own an active Florida registration	& Registered Agent.	nni, FL 33175
Miami, FL 33175 ARTICLE III - Registered The Limited Liability Computation of the comput	Agent, Registered Office, any cannot serve as its own an active Florida registration	& Registered Agent. on.) d agent are:	nni, FL 33175
Miami, FL 33175 ARTICLE III - Registered The Limited Liability Computation of the comput	Agent, Registered Office, any cannot serve as its own an active Florida registration and address of the registered	& Registered Agent.	nni, FL 33175
Miami, FL 33175 ARTICLE III - Registered The Limited Liability Computation of the comput	Agent, Registered Office, any cannot serve as its own an active Florida registration and address of the registered	& Registered Agent. on.) d agent are:	nni, FL 33175
Miami, FL 33175 ARTICLE III - Registered The Limited Liability Computation of the comput	Agent, Registered Office, any cannot serve as its own an active Florida registration at address of the registered Jannett Rodriguez	& Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual or
Miami, FL 33175 ARTICLE III - Registered The Limited Liability Computation of the comput	Agent, Registered Office, any cannot serve as its own an active Florida registration that registered address of the registered Jannett Rodriguez	& Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual or
Miami, FL 33175 ARTICLE III - Registered The Limited Liability Computation of the comput	Agent, Registered Office, any cannot serve as its own an active Florida registration that address of the registered Jannett Rodriguez 12741 SW 38 Ter Florida street address	& Registered Agent. on.) d agent are: Name	nt's Signature: You must designate an individual or

the ee 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)

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address: er
"MGR" = Manager	
MGR	Terra Vistahermosa, S.L.
MOK	Rafael Calvo 31 Bajo, 28010 Madrid, España
MGR	Luis Antonio Herrera Rocha
Mok	Rafael Calvo 31 Bajo, 28010 Madrid, España
MGR	Elda Luisa Morales Tapia Rafael Calvo 31 Bajo, 28010 Madrid, España
	Rafael Calvo 31 Bajo, 28010 Madrid, Espana
(Use attachment if necessary) CLE V: Effective date, if other the effective date is listed, the date if	an the date of filing: 1/15/21 (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days a
CLE V: Effective date, if other the effective date is listed, the date is of filing.) If the date inserted in this block current's effective date on the D	nust be specific and cannot be more than five business days prior to or 90 days a does not meet the applicable statutory filing requirements, this date will not be list repartment of State's records.
CLE V: Effective date, if other the effective date is listed, the date is of filing.) If the date inserted in this block current's effective date on the D	nust be specific and cannot be more than five business days prior to or 90 days a does not meet the applicable statutory filing requirements, this date will not be list repartment of State's records.
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CLE V: Effective date, if other the effective date is listed, the date is of filing.) If the date inserted in this block cument's effective date on the DCLE VI: Other provisions, if any. REQUIRED SIGNATURE:	does not meet the applicable statutory filing requirements, this date will not be list repartment of State's records.
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CLE V: Effective date, if other the effective date is listed, the date re of filing.) If the date inserted in this block current's effective date on the DCLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signatt This docume	does not meet the applicable statutory filing requirements, this date will not be list repartment of State's records. The proof a member or an authorized representative of a member. It is executed in accordance with section 605.0203 (1) (b), Florida Statutes, that any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.
CLE V: Effective date, if other the effective date is listed, the date re of filing.) If the date inserted in this block current's effective date on the DCLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signatt This docume	does not meet the applicable statutory filing requirements, this date will not be list repartment of State's records. The partment of a member or an authorized representative of a member. It is executed in accordance with section 605.0203 (1) (b). Florida Statutes, at any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.