

L210000 46027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

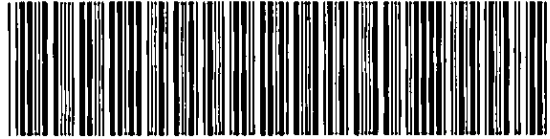
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600358705956

02/08/21--01002--006 ♦♦125.00

21 FEB -5 PM 3:53

2021 FEB -5 PM 2:04

FLORIDA-CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
(850) 524-6243

(OFFICE USE ONLY)

Business Name & Document Number, (if known):

I. AVANTILATINOAMERICA LLC
Name Document Number (if known)

☒ Walk in ☐ Will wait

☐ Certified Copy
☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ INC

☐ OTHER - Corp

AMENDMENTS

☐ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Conversion

☐ Merger

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

☐ Statement of Authority

☐ APOSTIL () ☐
COUNTRY

REGISTRATION/QUALIFICATIONS

☐ Foreign Filing
☐ Limited Partnership
☐ Reinstatement

☐ Trademark
☐ Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: New England System
Division of Corporations

SUBJECT: [REDACTED]

[REDACTED]

[REDACTED]

Now, [REDACTED]

MAV IN DEED COPY

MAV IN CONSTITUTION COPY

PLEASE CLERK SET UP

UNITED STATES

MAV IN DEED COPY

MAV IN DEED COPY IN CONSTITUTION COPY

[REDACTED]

[REDACTED]

MAV IN DEED COPY

[REDACTED]

Name of Person [REDACTED] Division of Corporations

[REDACTED]

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Mailing Address

New England System
Division of Corporations
P.O. Box 127
New England System

Street Address

New England System
Division of Corporations
7400 Main Street, Suite 100
Boston, MA 02118

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

1. Name of the Company

ANYONE ANYWHERE

2. The Company shall have the following purpose(s):

ARTICLE II - Address

1. The principal office of the Company shall be located at:

Principal Office Address

Mailing Address

777 BRICKELL AVENUE

777 BRICKELL AVENUE

SUITE 100

MIAMI, FL 33131

MIAMI, FL

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

1. The registered agent of the Company shall be: BUCHANAN PARTNERS, L.P. of 777 BRICKELL AVENUE, SUITE 100, MIAMI, FL 33131.

2. The registered office of the Company shall be:

BUCHANAN PARTNERS, L.P.

777 BRICKELL AVENUE, SUITE 100

MIAMI, FL 33131

MIAMI

FL 33131

mei
Principal Agent's Signature

(CONTINUED)

9091 FEB -5 PM 2:04

ARTICLE IV:

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

Title:

Name and Address:

MEMBER - Authorized Member

MANAGER - Manager

NAME:

MARTIN DELLOCA
117 BRICKELL AVENUE, SUITE 1000
MIAMI, FL 33131

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing _____

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document shall be deemed to be filed with the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any _____

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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 s. 817.155, F.S.

MARTIN DELLOCA

Typed 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)