

2/8/2021

Division of Corporations

H2100051665

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.

((H21000054336 3)))



H210000543363ABCY

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: anamaya1237@gmail.com

**FLORIDA LIMITED LIABILITY CO.
PARALEGAL SOLUTIONS OF SOUTH FLORIDA, LLC**

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

Electronic Filing Menu Corporate Filing Menu Help

2021 FEB -9 AM 8:30

2021 FEB -9 AM 8:39

FILED

H21000054336 3

**ARTICLES OF ORGANIZATION OF
PARALEGAL SOLUTIONS OF SOUTH FLORIDA, 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:

PARALEGAL SOLUTIONS OF SOUTH FLORIDA, LLC

ARTICLE II -Address:

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

14605 SW 63 Ter
Miami, FL 33183

ARTICLE III -Registered Agent and Registered Office

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

ANAMARI AMAYA
14605 SW 63 Ter
Miami, FL 33183

ARTICLE IV – Managers

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

<u>Title</u>	<u>Name and Address</u>
Manager	ANAMARI AMAYA 14605 SW 63 Ter Miami, FL 33183

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 8th day of February, 2021.

/s/ Anamari Amaya

Name: **ANAMARI AMAYA**

FILED
2021 FEB -9 AM 8:30
FILED

H21000054336 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.)

/s/ Anamari Amaya

Name: ANAMARI AMAYA

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

/s/ Anamari Amaya

By: ANAMARI AMAYA, its Manager

FILED
2021 FEB -9 AM 8:30
CLERK OF COUNTY