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(Re	questor's Name)	
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SECRETARY STATE
TALLAPACER, FL

W2000145076

COVER LETTER

New Filing Section

TO:

Divi	sion of Cor	porations				
UBJECT:	AMV Elect	tric, LLC				
OBJECT.		Na	me of Lim	ited Liabili	ty Company	
ne enclosed	Articles of	Organization and	l fee(s) are	submitted	for filing.	
		ondence concerni			-	
					······································	
 1:	elix Velazo			:		
				Name of	Person	
٨	MV Electri	ie, LLC				
_		·		Firm/Cor	mpany	
1	34 E 9th St	reet				
_		•		Addre	88	
Н	ialeah, Flor	rida 33010				
_			Ci	ty/State and	l Zip Code	
Fe	ix Velazqu				7597 Cya	
	E	E-mail address: (t	o be used f	for future a	nnual report notificati	on)
further info	rmation co	ncerning this mat	ter, please	call:		
Fe	lix Velazqı	ıcz	305 at (5	305-2297	
	Name	e of Person		ea Code	Daytime Telephon	e Number -
nclosed is a	check for th	ic following amo	uni:			
Ū\$125.00 Fi	ling Fee	□\$130.00 Fili Certificate of !		Certifie	.00 Filing Fee & d Copy l copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address ling Section		-	Street Address New Filing Section Di	vision

New Filing Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 21, 2020

FELIX VELAZQUEZ 134 E 9TH STREET, APT. 209 HIALEAH, FL 33010

SUBJECT: AMV ELECTRIC, LLC Ref. Number: W20000145076

2021 FED 15 PM 3: 10

We have received your document for AMV ELECTRIC, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for trie following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

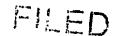
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Derrick Thompson Regulatory Specialist II

Letter Number: 720A00025854

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



A	RΤ	"16	ľ	F	l _	No	nie

The name of the Limited Liability Company is:

2021 FEB 15 PM 3: 12

SECRETARY OF STATE

AMV Electric, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

<u>Principal Office Address</u> :	<u>Maining Address</u> :
134 E 9th Street, Apt. 209	Same
Hialeah, Florida 33010	
***************************************	<u> </u>
ARTICLE III - Registered Agent, Registered Office, & R	egistered Agent's Signature:
(The Limited Liability Company cannot serve as its own Reg	
another business entity with an active Florida registration.)	

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

Felix Velazquez		
	Name	
134 E 9th Street		
Florida street addr	ess (P.O. Box <u>NOT</u> acc	reptable)
Hialeah	1 Florida	33010
City	State	Zip

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. Thereby 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:

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	Felix Velazouez	
	134 E 9th Street, Ant. 209 Hialeah, Florida 33010	- -
	rialean, Fiorida 53010	-
		- -
	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	- ~
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(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the da	te of filing: January 01, 2021 . (OPTIONAL)	
	specific and cannot be more than five business days prior to or 90	days after
he date of filing.) Note: If the date inserted in this block does not	meet the applicable statutory filing requirements, this date will not	t be listed as
the document's effective date on the Departmen		
ARTICLE VI: Other provisions, if any.		
None		
REOUIRED 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.

Felix Velazguez

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)