L21000099492

(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:
W210000 30564

Office Use Only



600361087146

2021 MAR -8 PH 2: 13

Belling to all of B

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 3/3/2021

NAME: ECO STONE INVESTMENTS LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

.

A. W.

	w Filing Sec rision of Co.					
SUBJECT:	Eco Stone	Investments LLC				
SUBJECT:		Name -	of Limited Liab	lity Company		
The enclosed	d Articles of	Organization and fee	e(s) are submitte	d for filing.		
Please return	all correspo	ondence concerning the	his matter to the	following:		
I	Eddie Ojeda	& Rocio Meza				
-			Name o	f Person		
į	Eco Stone Ir	westments LLC				
_	Firm/Company					
1	2 757 W 77tl	ı P l				
-	Address					
i	Hialeah, Fl 3	33016				
-	درون المعادلة على	22@hotmail.com	City/State a	nd Zip Code		
			used for future	annual report notificat	ion)	
For further inf	ormation co	ncerning this matter.	please call:			
B	Eddie Ojeda		786	315-1315 _)		
	Nam	ne of Person		Daytime Telephon		
Enclosed is a	a check for t	he following amount:				
□\$125.00 F		□\$130.00 Filing F Certificate of State	ee & □\$1 us Certif	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	New F Divisio P.O. B	ng Address iling Section on of Corporations tox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah: 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Eco Stone Investments LLC	
(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
RTICLE II - Address: he mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2757 W 77th Pl Hialeah, Fl 33016-5635	2757 W 77th Pl Hialeah, Fl 33016-5635
The Limited Liability Company cannot serve as its own Regi	
The Limited Liability Company cannot serve as its own Reginother business entity with an active Florida registration.)	istered Agent. You must designate an individual or nt are:
The Limited Liability Company cannot serve as its own Reginother business entity with an active Florida registration.)	stered Agent. You must designate an individual or
The Limited Liability Company cannot serve as its own Reginother business entity with an active Florida registration.) The name and the Florida street address of the registered ager	stered Agent. You must designate an individual or nt are:
	stered Agent. You must designate an individual or nt are:

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..

State

Hialeah

City

Registered Agent's Signature (REQUIRED)

33014

Zip

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Memb	Name and Address: per
"MGR" = Manager AMBR	Eddie Oieda 421 W 77th St Hialeah, Fl 33014
<u>AMBR</u>	Rocio Meza 421 W 77th St Hialeah. Fl 33014
(Use attachment if necessary)	
If an effective date is listed, the date rate date in the date of filing.)	an the date of filing:
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Eddie Dje	
This documer I am aware tha	re 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 hird degree felony as provided for in s.817.155, F.S.

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)

Eddie Oieda & Rocio Meza

\$ 5.00 Certificate of Status (Optional)