

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L210001014033

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To:

Division of Corporations
Fax Number : (850)617-6381

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
DUVERNAL ELECTRIC LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED
2021 MAR 12 PM 4:38
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OF FLORIDA
DIVISION OF CORPORATIONS
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3/15/21
[Signature]

ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY**ARTICLE I – Name:**

The name of the Limited Liability Company is:

DUVERNAL ELECTRIC LLC

ARTICLE II – Address:

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

Principal Office Address:

30521 SW 156th Ave
Homestead, FL 33033

Mailing Address:

30521 SW 156th Ave
Homestead, FL 33033

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Omar Duvernal Zequeira
30521 SW 156th Ave
Homestead, FL 33033

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 608, F.S..



Registered Agent's Signature (REQUIRED)
Omar Duvernal Zequeira

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FLORIDA

ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Omar Duvernal Zequeira
30521 SW 156th Ave
Homestead, FL 33033

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 11, 2021.
(OPTIONAL)

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

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Omar Duvernal Zequeira
Typed or printed name of signee

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STATE OF FLORIDA