

## Florida Department of State

## Division of Corporations

## Electronic Filing Cover Sheet

**L210001081153**

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001081153)))



H210001081153ABCT

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 : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

\*\*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.  
OTRO CLIENTE SATISFECHO LLC

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

2021 MAR 17 PM 12:53

FILED

STATE  
OF FLORIDA3/18/21  
SA

2021 MAR 17 PM 4:39

RECEIVED

DIVISION OF CORPORATIONS  
COMMERCIAL  
SERVICES

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

OTRO CLIENTE SATISFECHO LLC

**ARTICLE II - Address:**

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

13723 SW 160th Ter.

MIAMI, FL 33177

**ARTICLE III - Registered Agent, Registered Office:**

The name and the Florida street address of the registered agent are: *(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.)*

NAHUM MASIS

13723 SW 160th Ter

Miami FL 33177

**ARTICLE IV**

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

JOSE ALVARADO ALVARADO

MGR

NAHUM MASIS

MGR

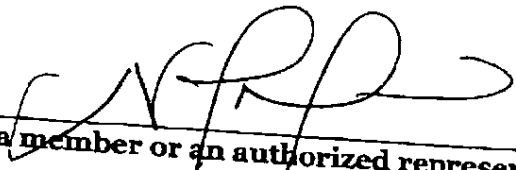
BELKIS CASTILLO TORREZ

AMBR

YOKASTA MASIS

AMBR

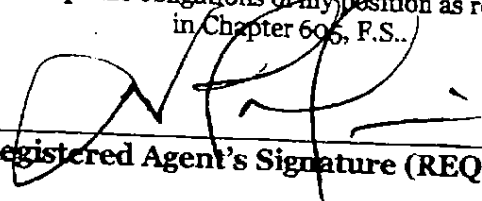
**Required Signatures:**

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

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 s.817.155, F.S.

NAHUM MASIS  
Typed or printed name of signee

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 606, F.S..

  
Registered Agent's Signature (REQUIRED)

ED  
2021 MAR 17 PM 12:53  
STATE  
FLORIDA