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(((H210001067193)))



H210001067193ABC.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : L & R INTERNATIONAL FIRM INC

Account Number : I20200000026 Phone : (786)413-4344

Fax Number : (305)222-9004

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. **3NAMES LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00

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H21000106719 3

COVER LETTER

	ew Filing Sec ivision of Cor								
SUBJECT	3NAMES LL	С							
		Nan	ne of Lim	ited Liabil	ity Company				
The enclos	ed Articles of	Organization and	fee(s) are	submitted	l for filing.				
Please retu	m all correspo	ondence concernin	g this ma	tter to the	following:				
	JOSE MIGUE	L GREGORIO ARRO	OYO LAGO	5					
				Name of	Person				
									
				Firm/Co	ompany				
	9021 SW 142	AVE STE 1615		Add					
				Adu	, Cas				
	MIAMI, FL 33	186	C	itv/State ar	nd Zip Code				
	JMARROYO4@	CHOTMAIL.COM							
	I	E-mail address: (to	be used	for future	annual report notificati	on)			
For further i	nformation co	ncerning this matt	er, please	call:					
	JOSE ARROY	0	at (6	203-5116		202		آ
	Nam	e of Person		rea Code	Daytime Telephon	e Number	2021 MAR 180	. ;	
Enclosed i	s a check for t	he following amou	ınt:				<u> </u>	. :	
⊠\$ 125.00) Filing Fee	□\$130.00 Filin Certificate of S		Certif	55.00 Filing Fee & fied Copy fial copy is enclosed)	Certificate Certified C	Filing Fee Son of Status & Opy Opy Status & Opy Opy See College (See College C	D	
	New F Divisi	ng Address Hing Section on of Corporation Box 6327	s		Street Address New Filing Section D The Centre of Tallahi 2415 N. Monroe Stre	assee			

Taliahassee, FL 32303

Tallahassee, FL 32314

H210001067193

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	LE I - Name: ne of the Limited Liabil	lity Company is:		·	
	3NAMES LLC				
	(Must con	ntain the words "Limited	Liability Company, "	'L.L.C.," or "LLC.")	
	LE II - Address: ling address and street	address of the principal	office of the Limited	Liability Company is:	
	Princi	pal Office Address:		Mailing Add	lress:
	9021 SW 142 AVE ST	E 1615	9021	SW 142 AVE STE 1615	
	MIAMI, FL 33186	<u> </u>	MAM	11, FL 33186	
another	business entity with an	ny cannot serve as its own active Florida registration address of the registere	ion.)		
		L&R INTERNATIONAL	L FIRM, INC		
			Name		
			0.07.077.604		
		8410 WEST FLAGLER	R ST, STE 205 :ss (P.O. Box <u>NOT</u> ac	raantohla)	
		Piorida succe adure	.35 (F.O. BOX <u>NOT</u> ac	сериале	
		MIAMI	FL	33144	
		City	State	Zip	
place desi further ag	ignated in this certificat gree to comply with the p	d agent and to accept ser te, I hereby accept the ap provisions of all statutes obligations of my position	pointment as registere relating to the proper	ed agent and agree to ac and complete performa as provided for in Chapt	et in this capacity. I nce of my duties, and I
		Kegr			702111AR 18 PM 1:29 202111AR 18 PM 1:29 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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ARTICLE IV-

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

MGR" = Manager AMBR JOSE MIGUEL GREGORIO ARROYO LAGO 9021 SW 142 AVE STE 1615 MIAMI, FL 33186 AMBR INGRID MILENA ANGULO SANTANDER 9021 SW 142 AVE STE 1815 MIAMI, FL 33186 (Use attachment if necessary) LE V: Effective date, if other than the date of filing: 03/16/2021 (OPTIONAL) ective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days	<u>Title:</u> "AMBR" = Auth	orized Member	Name and Address:		
AMBR JOSE MIGUEL GREGORIO ARROYO LAGO 8021 SW 142 AVE STE 1615 MIAMI, FL 33185 MIAMI, FL 33185 MIAMI, FL 33186 (Use attachment if necessary) LE V: Effective date, if other than the date of filing: 02/15/2021 LE V: Effective date, if other than the date of filing: 02/15/2021 LE V: Effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liment's effective date on the Department of State's records. EVI: Other provisions, if any. ALL LAWFUL BUSINESS REQUIRED SIGNATURE: Signature of phember or an authorized representative of a member. This document is prevated 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. Typed or printed name of signee Filing Feess: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$\$5.00 Certificate of Status (Optional)					
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