

L21000129457

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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

((H21000110661 3)))



H210001106613ABCS

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 : EXPERTAX
Account Number : I20200000010
Phone : (407)777-7470
Fax Number : (321)206-9743

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.
VENTURA CONCRETE LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

RECEIVED
2021 MAR 29 AM 9:10
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

21 MAR 29 AM 11:07

Electronic Filing Menu

Corporate Filing Menu

Help

4210001106613

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: VENTURA CONCRETE, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ESTRADA, AIDA

TO: New Filing Section
Division of Corporations

Name of Person

SUBJECT: VENTURA CONCRETE

Firm/Company

14 SUNDIAL KEY DR

The enclosed articles of organization

Address

Please return all correspondence concerning this matter to the following:

OCOE, FL 34761

ESTRADA, AIDA

City/State and Zip Code

TO: New Filing Section

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUBJECT: ESTRADA, AIDA 407 2198611

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

For further information in ordering, call:

Mailing Address

ESTRADA New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

ESTRADA New Filing Section

4210001106613

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

21 MAR 29 AM 11:07

H210001106613

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VENTURA CONCRETE, 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:

Principal Office Address:

Mailing Address:

14 SUNDIAL KEY DR
OCOE, FL 34761

14 SUNDIAL KEY DR
OCOE, FL 34761

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:

ESTRADA, AIDA

Name

14 SUNDIAL KEY DR

OCOE, FL 34761 Florida street address (P.O. Box **NOT** acceptable)

OCOE,

FL

34761

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, 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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

21 MAR 29 AM 11:07

H210001106613

H 210001106613

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.

MEMBER

ESTRADA, AIDA
14 SUNDIAL KEY DR
OCOE, FL 34761

MEMBER

VENTURA, NERY
14 SUNDIAL KEY DR
OCOE, FL 34761

MEMBER

MEMBER

MEMBER

MEMBER

MEMBER

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 505.0203 (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.

ESTRADA, AIDA

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

21 MAR 29 AM 11:07

H 210001106613