

603021 L21000144546 Division of Corporations ((H21000136042 3)))
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From:
Account Name : ISAMAR TORRES
Account Number : I20200000137
Phone : (786)660-0108
Fax Number : (305)503-7123

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: onestopsolutionsfl@gmail.com

**FLORIDA LIMITED LIABILITY CO.
GARCIA CONSULTANTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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(((F121000136042 3)))

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: GARCIA CONSULTANTS 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:

JORGE ENRIQUE GARCIA NARREA

Name of Person



Firm/Company

5990 NE 4TH CT APT 5

Address

MIAMI, FLORIDA, 33137

City/State and Zip Code

COCOLICHEGN@HOTMAIL.COM

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

For further information concerning this matter, please call:

JORGE GARCIA

954

2560562

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)

Mailing Address

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

FILED
DATE
APR 6 2021
TALLAHASSEE, FL

2021 APR -6 PM 2:22

FILED

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

The name of the Limited Liability Company is:

GARCIA CONSULTANTS 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:**5990 NE 4TH CT APT 5
MIAMI, FLORIDA, 331375990 NE 4TH CT APT 5
MIAMI, FLORIDA, 33137**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:

ISAMAR TORRES

Name

4167 NW 135TH STFlorida street address (P.O. Box NOT acceptable)OPA LOCKAFLORIDA33054

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..

Isamar Torres

Registered Agent's Signature (REQUIRED)

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