

5/27/2021

Division of Corporations

L21000249256

Florida Department of State
Division of Corporations
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Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
ATTENTIONS PART 1010 LLC**

Certificate of Status	0
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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ATTENTIONS PART 1010 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:

**114 HAMPTON ROAD
UNIT 311
CLEARWATER, FLORIDA 33759**

Mailing Address:

**114 HAMPTON ROAD
UNIT 311
CLEARWATER, FLORIDA 33759**

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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:

BEHZAD CESAR RAVAN, CPA

Name

444 BRICKELL AVENUE, SUITE 428

Florida street address (P.O. Box NOT acceptable)

MIAMI, FLORIDA 33131

City, State and 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)

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

Name, Title and Address:

LILIANA CAROLINA URRECHEAGA MORENO, MANAGING MEMBER
114 HAMPTON ROAD
UNIT 311
CLEARWATER, FLORIDA 33759

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.

N/A

REQUIRED SIGNATURE: 

Signature of a member or an authorized representative of a member. This document is executed 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.

LILIANA CAROLINA URRECHEAGA MORENO

Typed or printed name of signee

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