# L2 000304257

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f		

Office Use Only



300368284473

07/01/21--01006--015 \*\*125.00

2021 JUL -1 PH 12: 29

21 JUL -1 648 87

J DENNIS JUL 02 2021

### COVER LETTER

то:	New Filing Section Division of Corporations	
SUBJE	SURTIMULTIFABRICA INTERNATIONAL, LLC	
SUBJE	Name of Limited Liability Company	
The enc	losed Articles of Organization and fee(s) are submitted for filing.	
Please r	eturn all correspondence concerning this matter to the following:	
	SIOLY F RODRIGUEZ/CARLOS A. HURTADO SOSA	
	Name of Person	
	Firm/Company	
	250 NE 25TH ST # 910	
	Address	
	MIAMI, FL 33137	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification	)
For furthe	r information concerning this matter, please call:	
	at ()	
	Name of Person Area Code Daytime Telephone N	Sumber
Enclose	d is a check for the following amount:	
	00 Filing Fee	☐\$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

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

SURTIMULTIFABRIC	CA INTERNATIONAL.	LLC	
(Must contain	n the words "Limited Lia	bility Compan	y, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	ress of the principal offic	ce of the Limit	ed Liability Company is:
<u>Principal</u>	Office Address:		Mailing Address:
250 NE 25TH ST #910	. MIAMI, FL 33137		50 NE 25TH ST #910, MIAMI, FL 33137
The Limited Liability Company canother business entity with an act	annot serve as its own Re ive Florida registration.)	egistered Agen	gent's Signature: t. You must designate an individual or
The Limited Liability Company canother business entity with an act the name and the Florida street ad	annot serve as its own Re ive Florida registration.)	egistered Agen	
The Limited Liability Company canother business entity with an act the name and the Florida street ad	annot serve as its own Re ive Florida registration.) dress of the registered ag SIOLY F RODRIGUEZ	egistered Agen	
The Limited Liability Company or mother business entity with an act The name and the Florida street ad	annot serve as its own Re ive Florida registration.) dress of the registered ag SIOLY F RODRIGUEZ	egistered Agen	
The Limited Liability Company or mother business entity with an act The name and the Florida street ad	annot serve as its own Re ive Florida registration.) dress of the registered ag SIOLY F RODRIGUEZ	egistered Agen gent are: Vanne	t. You must designate an individual or
another business entity with an act	annot serve as its own Relive Florida registration.)  dress of the registered at SIOLY F RODRIGUEZ  N  250 NE 25TH ST #910	egistered Agen gent are: Vanne	t. You must designate an individual or

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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

21 班一 和多可

# ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager CARLOS ANTONIO HURTADO SOSA 250 NE 25TH ST =910, MIAMI, FL 33137 <u>AMBR</u> AMBR KENIA CRISTINA FERNANDEZ MENA 250 NE 25TH ST #910. MIAMI, FL 33137 (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 605.0203 (1) (b), Florida Statutes. I am aware that any fulse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

CARLOS ANTONIO HURTADO SOSA

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)