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COVER LETTER,

	Registration Section Division of Corporations			
CLID IECT.	JCHIRINO CONSTRUCTION LLC.,			
SOBJEC	T:Name of Limited	Liability Company mitted for filing.		
The enclos	sed Articles of Organization and feets) are sub	_		
Please reti	urn all correspondence concerning this matter t	•		
	MARIANA GOMEZ RODRIGUEZ	, f		
	Ni	ime of Person		
	JCHIRINO CONSTRUCTION LLC			
	Firm/Company			
	217 ORANGE LANE			
		Address		
	TAMPA, FL 33610			
	City/S ALEXANDER3225@OUTLOOK.COM	ate and Zip Code		
	E-mail address: (to be used for f	ature annual report notification)		
For further i	information concerning this matter, please call	·		
	MARIANA GOMEZ RODRIGUI 813	6503968		
		ode Daytime Telephone Number		
Enclosed i	is a check for the following amount:			
S125.00 F	Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy ditional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section	Street Address New Filing Section		
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liab	ility Company is:			
JCHIRINO CONS	TRUCTION LLC.,			
(Must en	d with the words "Limite	d Liability Company. "	L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal of	office of the Limited Li	ability Company is:	
Principal Office Address:			Mailing Address:	
217 ORANGE LA	217 ORANGE LANE		217 ORANGE LANE	
TAMPA, FL 3361	0	TAMP	A, FL 33610	
The name and the Florida stre	et address of the registere MARIANA GOME			
		ranic		
	217 ORANGE LAN			
	Florida street addres	ss (P.O. Box <u>NOT</u> acce	eptable)	
	TAMPA	FLORIDA	33610	
	City	State	Zip	
Having been named as registere place designated in this certifica further agree to comply with the am familiar with and accept the	te, I hereby accept the app provisions of all statutes r obligations of my position	pointment as registered relating to the proper a	agent and agree to act nd complete performan provided for in Chapte	in this capacity. I we of my duties, and I
		(CONTINUED)		

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ARTICLE IV-

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

Title:	NU — A al a la da al Alda ada a	Name and Address:
	C" = Authorized Member = Manager	
	= Manager =Manager	MARIANA GOMEZ RODRIGUEZ
		217 ORANGE LANE
		TAMPA, FL 33610
AMBR		ALEXANDER CHIRINO ULLOA
AMDR		217 ORANGE LANE
		TAMPA, FL 33610
		
(Use att	achment if necessary)	
RTICLE V: Ef	fective date, if other than the date	of filing: <u>08/31/2021</u> . (OPTIONAL)
		ecific and cannot be more than five business days prior to or 90 days after
he date of filing. Note: If the date		meet the applicable statutory filing requirements, this date will not be listed a
	ffective date on the Department	
ne dizeament 3 c	treetive date on the isepartment	Critical Seconds.
RTICLE VI: 0	ther provisions, if any.	
GENERAL CON	STRUCTION RESIDENTIAL	AND COMMERCIAL
REOU	RED SIGNATURE:	
		I mayupe
	Signature of a m	ember or an authorized representative of a member.
	This document is execu	ited 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 \$.317.155, F.S.

MARIANA GOMEZ RODRIGUEZ

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)