

9/17/21, 11:29 AM

Division of Corporations

L210004137HS

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.

((H21000347302 3)))



H210003473023ABCW

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 : LIANY PRIETO
Account Number : I20210000114
Phone : (305)301-2041
Fax Number : (786)633-4710

****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.
HERNANDEZ AUTO TRANSPORTATION LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

((H21000347302 3)))

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: HERNANDEZ AUTO TRANSPORTATION 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:

NAYLA HERNANDEZ GONZALEZ

Name of Person

Firm/Company

11780 SW 18 ST APT 220

Address

MIAMI, FL 33175

City/State and Zip Code

NAYLAPEDRO1213@GMAIL.COM

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

For further information concerning this matter, please call:

_____ at (727) 240-8073
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

((H21000347302 3)))

(((H2100347302 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

HERNANDEZ AUTO TRANSPORTATION 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:
11780 SW 18 ST APT 220	11780 SW 18 ST APT 220
MIAMI, FL 33175	MIAMI, FL 33175

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:

NAYLA HERNANDEZ GONZALEZ		
Name		
11780 SW 18 ST APT 220		
Florida street address (P.O. Box NOT acceptable)		
MIAMI	FL	33175
City	State	Zip

FILED
2021 SEP 20 AM 9:57
TALLAHASSEE, FLORIDA

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)

((H21000347302 3)))

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

AMBR

NAYLA HERNANDEZ GONZALEZ

11780 SW 18 ST APT 220

MIAMI FL 33175

(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.

NAYLA HERNANDEZ GONZALEZ 100% OF THE SHARES

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.

NAYLA HERNANDEZ GONZALEZ

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)

((H21000347302 3)))