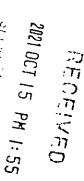
# L21000 449650

(Requestor's Name)	-
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	

Office Use Only



900374168409



## FLORIDA FILING & SEARCH SERVICES, INC.

# P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/15/21

**NAME**: WALDY'S AUTOMOTIVE IN TAMPA LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

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

	 		. •	
$\Lambda R$	 	_ `	Same	٠.

The name of the Limited Liability Company is:

2021 OCT 15 PM 2: 48

SECRETARY OF STATE ALL CHASSEE, FL

Waldy's	Automotive	In Tampa	LLC
71111013	, , , , , , , , , , , , , , , , , , , ,	4+1 1 551111/10	

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

Principal Office Address:			Mailing Address:	
1809 WEST WATERS		18	1809 WEST WATERS	
TAMPA, FL 33604	TAMPA, FL 33604		AMPA, FL 33604	
			t. You must designate an individual c	
ther business entity with an	n active Florida registration active Florida registered	on.)	i. Fou must designate an individual c	
ther business entity with ar	n active Florida registratio	on.) Lagent are:		
ther business entity with ar	n active Florida registration active Florida registered	on.)		
ther business entity with ar	n active Florida registration active Florida registered	na.) I agent are:	Tou hust designate an individual of	
ther business entity with ar	n active Florida registration active Florida registered address of the registered JESUS MONTES	on.) Lagent are: Name		
ther business entity with ar	n active Florida registration active Florida registered address of the registered JESUS MONTES  1809 WEST WATER	on.) Lagent are: Name		

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 l 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)

### 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	JESUS MONTES
	1809 WEST WATERS TAMPA, FL 33604
	CF STATE
	C. STATI
effective date is listed, the date must be ate of filing.)	late of filing:
ICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	O 211 +
Mary Mary Control of the Control of	Jesus Montes
This document is exc I am aware that any f	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
JESUS MON	
<u> </u>	TES 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)