# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. APEREZ INSURANCES LLC

Certificate of Status	1
Certified Copy	0
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

#### APEREZ INSURANCES 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:

8300 NW 53 STREET STE: 102 DORAL, FL 33166-7710

8300 NW 53 STREET STE: 102 DORAL, FL 33166-7710

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:

AMPARO PEREZ

Name

8300 NW 53 STREET, STE: 102

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

DORAL

FL

33166-7710

City

State

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)

(CONTINUED)

3052201440

Typed or printed name of signee

constitutes a third degree felony as provided for in s.817.155, F.S.

**AMPARO PEREZ**