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FLORIDA LIMITED LIABILITY CO. **HESPORCI, LLC**

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Help



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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idress of the principal office of the Limite	d Liability C	ompany is:		
Mailing Address:	Mailing Address:			
3411 Indian-Creek Drive, Apt 1	3411 Indian-Creek Drive, Apt 12()4			
Miami Beach, FL 33140	ان .	- <u>~</u>		
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ners, LLC c/o Valentin Lopez	-	: 00		
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Florida street address (P.O. Box NOT acceptable))			
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	Mailing Address: 3411 Indian Creek Drive, Apt Miami Beach, FL 33140 Int, Registered Office, & Registered Agent as its own Registered Agent. You must designate an transon.) address of the registered agent are: ters, LLC c/o Valentin Lopez Name S Road, Suite 811 Florida street address (P.O. Box NOT acceptable)	Miami Beach, FL 33140 mt, Registered Office, & Registered Agent's Signature as its own Registered Agent. You must designate an individual or anotration.) address of the registered agent are: iers, LLC c/o Valentin Lopez Name S Road, Suite 811 Florida street address (P.O. Box NOT acceptable)		

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 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM:	Rodrigo Espelosin Aquilar
÷	3411 Indian Creek, Apt 1204
	Miami Beach, FL 33140
MGRM	Javler Orci Verea
	.3411 Indian Creek, Apt 1204.
	Miami Beach, Ft 33140
	T
	<u> </u>
Use attachment if necessary)	ر
The state of the s	e date of filing: November 16, 2024 (OPTIO

REQUIRED SIGNATURE:

Signature of a member or unauthorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

> Rodrigo Espelosin Aquilar 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)