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### COVER LETTER

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

TREND SELLERS LLC

SUBJECT: \_\_

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:

ARMANDO VASQUEZ

Name of Person

ARMANDO TAXES LLC

Firm/Company

5721 NW 112TH AVE APT 108

Address

DORAL; FL 33178

City/State and Zip Code

.ARMANDO@ARMANDOTAXES.COM

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

For further information concerning this matter, please call:

	ARMANDO VASQUEZ	305 IL (	803-4427	
•	Name of Person	Area Code	Daytime Telephon	e Number
Enclosed	is a check for the following amount:			
∎\$125.0	10 Filing Fee S130.00 Filing F Certificate of Statu	s Certific	5.00 Fiting Fee & ed Copy al 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 D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

## TREND SELLERS LLC

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

#### AR'fICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
5721 NW 112TH AVE APT 306	5721 NW 112TH AVE APT 306
DORAL, FL 33178	DORAL, FL 33178

## 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:

	Name	
5721 אא 112TH	AVE APT 306	
Florida street add	ress (P.O. Box <u>NOT</u> acce	ptable)
DORAL	FLORIDA	33178

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)

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# ARTICLE IV-

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

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"AMBR" = Authorized Member "MGR" = Manager

AMBR

NATALY VASOUEZ 5721 NW 112TH AVE APT 306 DORAL FL 33178

Name and Address:

(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.)

<u>Note:</u> 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. ALL AND ANY LAWFUL BUSINESS

**REOUIRED 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.

NATALY VASOUEZ

Typed or printed name of signee

#### Filing Fees:

- S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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