Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. SHARON FONSECA LLC

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Electronic Filing Menu

Corporate Filing Menu

Help (

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICL	EI	_	Name:
731	-		_	TAME:

The name of the Limited Liability Company is:

	ed Listania	
The mailing address and street address of the principal office of the Limit Company is: 7505 NW 97+n C+		2822
DORAL FL 33178.	-	- 0
ARTICLE III	·	îr ea
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Provides of the Registered Agent, You must designate an individual or another business entering an active Florida registration.)	ited Liability	:57
SHARON ON'S FONSECA NEGOS	, ビ	
7505 NW 97+1 CT. DOEAL FL 33178		·
RTICLE IV he name and title of each person authorized to manage and control the Lin iability Company: (MGR or AMBR)	nited	
SHARON ONIS FONSECA NEGRO,	K. A	MBR

Required Signatures:



Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Sharon Fonseca

Typed or printed name of signee

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)