# L 22 Prid Deposition of St. 46765

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000049538 3)))



HZZ0000495383ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

iò

Account Name : MIAMI BUSINESS SOLUTIONS, INC.

Account Number : 120178008045 Phone : (786)546-4490 Fax Number : (800)323-1074

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Educado @ mbs laxes. Com

### FLORIDA LIMITED LIABILITY CO. ABEAS CONSTRUCTION GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

HL

Electronic Filing Menu

Corporate Filing Menu

Help

NECHERARY OF STATE

## ARTICLES OF ORGANIZATION FOR ABEA'S CONSTRUCTION GROUP LLC.

#### Article I

The name of the Limited Liability Company is: ABEA'S CONSTRUCTION GROUP LLC

#### Article II

The principal place of business address is: 2544 SW DECKARD ST PORT SAINT LUCIE. FL 34953

The principal place of mailing address is: 2544 SW DECKARD ST PORT SAINT LUCIE, FL 34953

#### **Article III**

The purpose for which this corporation is organized is: ALL LAWFUL BUSINESS.

#### **Article IV**

The name and Florida street address of the registered agent is: MIAMI BUSINESS SOLUTIONS INC.

1845 E WEST PKWY ST 9
FLEMING ISLAND, FL 32003

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.

**EDUARDO MIRALLES** 

#### **Article V**

The name and address of person(s) authorized to manage LLC:

Title: MMBR
JUAN J ABEA
2544 SW DECKARD ST
PORT SAINT LUCIE, FL 34953

#### **Article VI**

The effective date for this corporation shall be: 02/07/2022

Signature of members and authorized representative

I am the member or authorize representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the talendar year following formation of the LLC and every year thereafter to maintain "active Landaus.

I ABBA

SEURE TARY OF STATE