

L22000104764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

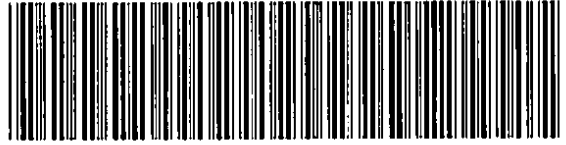
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000382828770

FILED  
2022 MAR 10 AM 8:07  
CLERK OF STATE  
TALLAHASSEE, FL

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2022 MAR 10 PM 4:22  
TALLAHASSEE, FL

11/3/11/28



**COGENCYGLOBAL**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
**866.625.0838**  
COGENCYGLOBAL.COM

Date: March 10, 2022

Account#: 120000000088

Name: Eric Hood

Reference #: 1620316

Entity Name: CFBUILD, LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

*PLEASE  
KEEP ORIGINAL  
SUBMISSION  
DATE  
AS  
FILED  
DATE*

Authorized Amount: \$125.00

Signature: Eric Hood



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 11, 2022

COGENCY

SUBJECT: CFBUILD, LLC  
Ref. Number: W22000031898

We have received your document for CFBUILD, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the Registered Agents name as it appears on DOS records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 922A00005882

RECEIVED  
2022 MAR 14 PM 4:34  
U. ARABIA

**COVER LETTER**

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

**SUBJECT: CFBUILD, LLC**

\_\_\_\_\_  
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:

JOHN S. BOHATCH, ESQ.

\_\_\_\_\_  
Name of Person

BOHATCH & PENARANDA, P.L.L.C.

\_\_\_\_\_  
Firm/Company

7301 SW 57TH COURT, SUITE 560

\_\_\_\_\_  
Address

SOUTH MIAMI, FL 33143

\_\_\_\_\_  
City/State and Zip Code

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

For further information concerning this matter, please call:

JOHN S. BOHATCH, ESQ.

305

666-1040

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional 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 Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

2022 MAR 10 AM 8:07

CFBUILD, LLC

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

CLERK OF STATE  
ALLAHASSEE, FL

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8525 SW 100th St  
Miami, FL 33156

8525 SW 100 St  
Miami, FL 33156

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:

G, B & B-B REGISTRIES, LLC

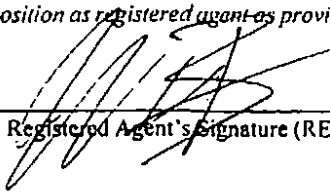
Name

7301 SW 57th Court, Suite 560

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

<u>South Miami</u>	<u>FL</u>	<u>33143</u>
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)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

Aniuska Gabriela Jorge Oro  
8525 SW 100 St  
Miami, FL 33156

MGR

Lilia Rosa Roque Guerrero  
285 NW 119th Ct  
Miami, FL 33182

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DEPT. OF STATE  
FLORIDA SECRETARY OF STATE

FILED

(Use attachment if necessary)

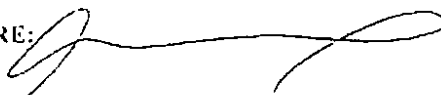
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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.)

**Note:** 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.

**REQUIRED 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.

Aniuska Gabriela Jorge Oro

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)