Division of Corporations Electronic Filing Cover Sheet

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(((H22000102382 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TRAMILEX LLC

Account Number : 120150000086

Phone

± (786)469-9163

Fax Number

: (305)848-3716

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

Email	Address:	

FLORIDA LIMITED LIABILITY CO. EXINJAG LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

P.O. Box 6327

Tallahassee, FL 32314

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COVER LETTER

	Division of Corporations				
CUDICC	EXINJAG LLC		•	,	
SUBJEC"	Name of Limited Liability Company		•		
The enclose	osed Articles of Organization and fee(s) are submitted for filing.				
Please reti	urn all correspondence concerning this matter to the following:				
	JAMES A. GUERRERO PANTOJA	•			•
	Name of Person		· .		
	EXINJAG LLC	·			
	Firm/Company				
	134 NW 107th TER				
, -	Address				
	PLANTATION, FL 33324				
	City/State and Zip Code			دم.	
	E-mail address: (to be used for future annual report notification)		2022 MAR	
For further	r information concerning this matter, please call:	•			 Į
	JAMES A GUERRERO 305 . 962-8453		स् : स :	8 P	1
	Name of Person Area Code Daytime Telephone N	umber		2:	1,
Raglocud	I is a check for the following amount:		18 A. A.	PH 12: 49	
	Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status		filing Fee, te of Status &		
	(additional copy is enclosed)	Certified)	
			•		
	Mailing Address Street Address New Filing Section New Filing Section Division of Corporations Division of Corporation	5	· .		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

2022-03-18 18:09:13 GMT LIZ 2000 (07382)

ARTICLESO	F ORGANIZATION FOR F	LORIDALIMI	ED LIABILITY COMPA	NY .
ARTICLE I - Name: The name of the Limited Liabil	ity Company is:		•	
		,		•
EXINJAG LLC				
(Must end	with the words "Limited	Liability Comp.	any, "L.L.C.," or "LLC	.")
ARTICLE II - Address: The mailing address and street a	address of the principal of	fice of the Limi	ted Liability Company	is:
Princi	pal Office Address:	•	Mailing	Address:
134 NW 107th TER		S	AME ADDRESS	•
PLANTATION, FL				
				<u> </u>
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an The name and the Florida stree	y cannot serve as its own active Florida registration	Registered Age n.)	gent's Signature: nt. You must designate	an individual or
the name and the Florida sirec	address of the registered	agent are.	•	
•	JAMES A. GUERRE			_ .
		Name .		
	134 NW 107th TER			
	Florida street address	s (P.O. Box <u>NO</u>	Tacceptable)	
	PLANTATION	FL	33324	
	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)

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		Name and Address:	-
"AMBR" = Authorized	Member		•
"MGR" = Manager		TALADO A CHERRENO DA L'EGIA	
AMBR	. ,	JAMES A. GUERRERO PANTOJA	- .
		134 NW 107th TER	_ `
	• •	PLANTATION, FL 33324	
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(Use attachment if neces			
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Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

JAMES A. GUERRERO PANTOJA

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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