3/24/22, 3:40 PM

## L22000 vision (Corporations) 194725

From: Yanet Avila

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H22000109721 3)))



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:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994

Fax Number : (305)328-4774

Ent(c)	the	email	address	for	this	busin	ess	entity	to	be	used	for	future
[교San	nual	repor	address t mailin	gs.	Enter	on1y	one	email	add	ress	ple	ase.	**

## FLORIDA LIMITED LIABILITY CO. SOTELO INVESTMENTS LLC

Certificate of Status	0
Certified Copy	T I
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

13053284774

From: Yanet Avila

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Page: 3 of 4

	E I - Name: of the Limited Liability	Company is:		
	SOTELO INVESTME		Liability Company, "	L.L.C" or "LLC.")
ARTICL The maili	E II - Address: ng address and street add			
	<u>Principa</u>	Office Address:		Mailing Address:
A DTICE	4995 NW 72nd AVE STE 205 MIAMI, FL 33166 E HI - Registered Ager	nt Registered Office	SAM	
(The Lim	ited Liability Company of ousiness entity with an ac	cannot serve as its ov	vn Registered Agent. Y	ou must designate an individual or
The name	and the Florida street a	ddress of the register	ed agent are:	
		BERENICE SOTE	LO GODOY	
			Name	
		4995 NW 72nd AV		
		Florida street addr	ess (P.O. Box <u>NOT</u> ac	ceptable)
		MIAMI	FL	33166
		City	State	Zin

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.

/s/ Berenice Sotalo Godoy

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2022 MAR 24 PM 2: 06

ARTICLE IV-

"ANADD" - Authorized Mambar	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	BERENICE SOTELO GODOY
THIRDIC	4995 NW 72nd AVE STE 205
	MIAMI, I'L 33166
AMBR	RAYMUNDO ALBERTO FUENMAYOR PEROZO
	4995 NW 72nd AVE STE 205 MIAMI. FL 33166
	MIAMI, FL 33100
	•
<del></del>	
•	
Tective date is listed, the date must of filing.) If the date inserted in this block does	to date of filing:
fective date is listed, the date must lof filing.)	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as
fective date is listed, the date must of filing.)  If the date inserted in this block does ment's effective date on the Depart.	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.
fective date is listed, the date must of filing.)  If the date inserted in this block does innent's effective date on the Depart.  LE VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.
fective date is listed, the date must of filing.) If the date inserted in this block does inserted at the Department's effective date on the Department.  E. VI: Other provisions, if any.  REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.
fective date is listed, the date must of filing.)  If the date inserted in this block does ment's effective date on the Depart.  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.    Baranica Sotalo Godoy   10   10   10   10   10   10   10   1
fective date is listed, the date must of filing.) If the date inserted in this block does ment's effective date on the Depart.  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of This document is e	be specific and cannot be more than five business days prior to or 90 days after into the applicable statutory filing requirements, this date will not be listed as ment of State's records.  **A Berenica Sotelo Godoy**  The member of an authorized representative of a member.
fective date is listed, the date must of filing.)  f the date inserted in this block does ament's effective date on the Depart.  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of This document is early am aware that any	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.    Baranica Sotalo Godoy   10   10   10   10   10   10   10   1

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)