

L22000164798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 APR 20 PM 1:08

SECOND JUDICIAL CIRCUIT
TALLAHASSEE, FL

RECEIVED

2022 APR 20 AM 8:34

ONE JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: 120210000160 AMOUNT: \$130.00

AUTHORIZATION SIGNATURE: 

J & E Villalobos Services LLC

BUSINESS

DOCUMENT #

 Pick up time

 Mail out

 Will wait

 Photocopy

 Certified Copy of Articles

 X Certificate of Status

NEW FILINGS

 Profit

 Not for Profit

 X Limited Liability

 Domestication

 Other

 CORP

AMENDMENTS

 Amendment

 Resignation of R.A. Officer/Director

 Change of Registered Agent

 Dissolution/Withdrawal

 Merger

 Conversion

OTHER FILINGS

 Annual Report

 Fictitious Name

 APOSTILL() Country:

REGISTRATION/QUALIFICATIONS

 Foreign filing

 Limited Partnership

 Reinstatement

 Other

EXAMINER'S INITIALS:

COVER LETTER

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

SUBJECT: J & E Villalobos Services 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:

FLOR LOZANO DUGGER

Name of Person

2 D CONSULTING ENTERPRISE LLC

Firm/Company

241 HAMMOCK CIRCLE

Address

DEBARY , FL 32713

City/State and Zip Code

2DCONSULTINGENTERPRISE@GMAIL.COM

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

For further information concerning this matter, please call:

FLOR LOZANO DUGGER 904 382 0889

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED**2022 APR 20 PM 1:08****SECRETARY OF STATE
TALLAHASSEE, FL****ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

J & E Villalobos Services LLC

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

ARTICLE II - Address:

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

Principal Office Address:Mailing Address:8433 NW 189TH ST APT# 1102
MIAMI GARDENS, FL 330158433 NW 189TH ST APT# 1102
MIAMI GARDENS, FL 33015**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:

JUAN CARLOS VILLALOBOS GUARDINO

Name

8433 NW 189TH ST APT# 1102Florida street address (P.O. Box **NOT** acceptable)

<u>MIAMI GARDENS</u>	<u>Florida</u>	<u>33015</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:AUTHORIZED MEM

JUAN CARLOS VILLALOBOS GUDINO
 8433 NW 189TH ST APT# 1102
 MIAMI GARDENS, FLORIDA 33015

AUTHORIZED MEMB

DUBRAZKA GUEDEZ CARRILLO
 8433 NW 189TH ST APT# 1102
 MIAMI GARDENS, FLORIDA 33015

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 04/19/2022 (OPTIONAL)

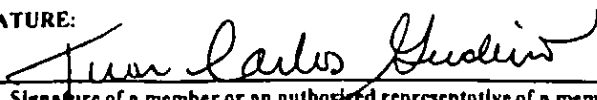
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

THE COMPANY IS ORGANIZED TO DO INSTALLATION OF EQUIPMENTS,
 GENERAL SERVICES AND ANY OTHER LEGAL ACTIVITY.

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.

JUAN CARLOS VILLALOBOS GUDINO

Typed or printed name of signer

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)

SECRETARY OF STATE
TALLAHASSEE, FL

2022 APR 20 PM 1:08

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