

L22000174634
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : MARVEN ENTERPRISES, INC
Account Number : I20210000171
Phone : (786)440-5396
Fax Number : (800)249-3601

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

Email Address: marh62miami@gmail.com

**FLORIDA LIMITED LIABILITY CO.
MARH62 MIAMI LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED

2022 APR 27 PM 1:02

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
REGISTRATION SERVICES

FILED
APR 27 2022
TALLAHASSEE, FL

2022 APR 27 PM 2:18

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COVER LETTER

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

SUBJECT: MARH62 MIAMI 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:

SALOME VENTURA

Name of Person

MARVEN ENTERPRISES, INC

Firm/Company

5901 NW 183RD ST STE 138

Address

HIALEAH, FL 33015

City/State and Zip Code

marventaxes@hotmail.com

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

For further information concerning this matter, please call:

SALOME VENTURA

786

440-5396

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARH62 MIAMI 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:

3820 NW 183RD ST APT 211
MIAMI GARDENS, FL 33055

Mailing Address:

3820 NW 183RD ST APT 211
MIAMI GARDENS, FL 33055

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:

MILKO A RIVAS HERNANDEZ

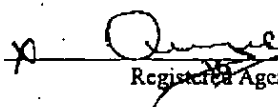
Name

3820 NW 183RD ST APT 211

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

<u>MIAMI GARDENS</u>	<u>FL</u>	<u>33055</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)

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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:

AMBR

MILKO A RIVAS HERNANDEZ
3820 NW 183RD ST APT 211
MIAMI GARDENS, FL 33055

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

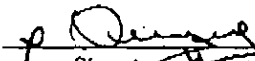
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be used as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

THE PURPOSE FOR WHICH THIS LIMITED LIABILITY COMPANY IS ORGANIZED IS TO ENGAGE IN ANY
AND ALL LAWFUL BUSINESS

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.

MILKO A RIVAS HERNANDEZ

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)

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