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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.

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To:

Division of Corporations

Fax Number : (850)617-6381

From;

Account Name : ALEX PINA CO. Account Number : I20190000095 Phone : (305)803-8471 Fax Number : (305)602-3977

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

client@alexpina.co Email Address:

FLORIDA LIMITED LIABILITY CO. ELITE CARS MOTORS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: ELITE CARS MOTORS 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:

7409 & 7411 NW 54TH ST MIAMI, FL 33166 MIAMI, FL 33166 MIAMI, FL 33166 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 registered agent are: ALEX PINA CO. Name 8400 NW 36TH ST STE 450 Florida street address (P.O. Box NOT acceptable)

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..

State

DORAL

City

Registered Agent's Signature (REQUIRED)

33166

(CONTINUED)

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
· ·	CONCTRU D DEBRIGG	
AMBR	GORETTY D BERRIOS 7409 & 7411 NW 54TH ST	
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	9HA3H, FL 35100	
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(Use attachment if necessary)		
(If an effective date is listed, the date must be the date of filing.)	date of filing:	
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	Garetty Berrios	

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.

GORETTY D BERRIOS

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)

ELITE CARS MOTORS LLC. L20000130275

May 3rd, 2022

Re: Statement of Name Release.

Dear Administration.

I, Goretty Del Valle Berrios, confirm that ELITE CARS MOTORS LLC. - L20000130275 will not be reinstated and therefore we release the use of the name to another entity.

Respectfully,

Goretty Del Valle Berrios

Goretty Berrios

2021 MAY -4 PM 5: 04