

W22000195340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

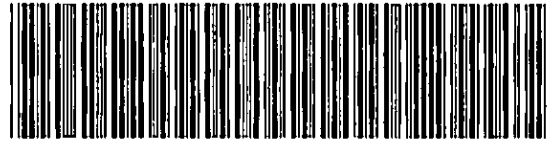
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W22000066091
W22000056764

Office Use Only



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2022 MAY 18 AM 7:47

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 2, 2022

MISLEIBYS QUINTERO
28004 SW 136TH PLACE
HOMESTEAD, FL 33033

SUBJECT: H&M RENTALS, LLC
Ref. Number: W22000056764

We have received your document for H&M RENTALS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P95000028276.

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace
Regulatory Specialist II

Letter Number: 122A00010092

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ~~H&M Rentals, LLC~~ H&M Unique Home Rentals, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following

Misleibys Quintero

Name of Person

Firm Company

28004 SW 136th Place

Address

Homestead, FL 33053

City, State and Zip Code

millyq01@hotmail.com

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

For further information concerning this matter, please call:

Misleibys Quintero at (305) 322-7902
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee
☐ \$150.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the limited liability company is:

~~H&M Rentals, LLC~~ H&M Unique Home Rentals, 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:

28004 SW 136th Place
Homestead, FL 33033

Mailing Address:

28004 SW 136th Place
Homestead, FL 33033

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:

Misleibys Quintero
Name
28004 SW 136th Place
Florida street address (P.O. Box NOT acceptable)
Homestead FL 33033
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.

Misleibys Quintero
Registered Agent's Signature (REQUIRED)

{ CONTINUED }

2017/08/28

ARTICLE IV -

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

Title:

Name and Address:

"AMBIC" = Authorized Member

"MGR" = Manager

MGR _____

Hiram Hernandez
28004 SW 136th Place
Homestead, FL 33033

MGR _____

Misleibys Quintero
28004 SW 136th Place
Homestead, FL 33033

(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 listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.6203(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. 817.55, F.S.

Misleibys Quintero

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)

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