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Division of Corporations

# Florida Department of State

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To:

Division of Corporations

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From:

Account Name : CORPOLICENSE, INC

Account Number : I20050000118

: (305)774-9606 Fax Number : (305)774-9660

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# FLORIDA LIMITED LIABILITY CO. TRUST EMMIGRATION SERVICES, LLC

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Help

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF TRUST EMMIGRATION SERVICES, LLC

### **ARTICLE I - NAME:**

The name of the Limited Liability Company Is:

# TRUST EMMIGRATION SERVICES, LLC

### **ARTICLE II - ADDRESS:**

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

PRINCIPAL ADDRESS:

3450 NW 85th Court, Apt 332

Doral, FL 33122

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The Registered Agent designated is: BEATRIZ HURTADO

BEATRIZ HURTADO 3450 NW 85<sup>th</sup> Court, Apt 332 Doral, FL 33122

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.

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## ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

TITLE:	NAME AND ADDRESS	<u>UNITS</u>
MGR	BEATRIZ HURTADO 3450 NW 85 <sup>th</sup> Court, Apt 332 Doral, FL 33122	50%
MGR	ZORAYA BORGES 3450 NW 85 <sup>th</sup> Court, Apt 332 Doral, FL 33122	7 26 AM 9: 06

Zovaya Borges

Manager

(In accordance with section 605.0201, Florida Statutes, The execution of this document constitutes an affirmation under The penalties of perjury that the facts stated herein are true)

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