

Jun 13 22:01:26p

6/13/22, 9:14 AM

L22000265525 (H22000204673 3)

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H22000204673 3)))



H220002046733ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : SICONT ENTERPRISES OF AMERICA INC
Account Number : I20160000041
Phone : (407)443-8973
Fax Number : (407)930-2626

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
INVERSIONES SAJ LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

42

RECEIVED
2022 JUN 13 AM 9:56
CORPORATIONS
COMMERCIAL
SERVICES

FILED
2022 JUN 13 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: INVERSIONES SAJ 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:

DESIREE TORRES

Name of Person

SICONT ENTERPRISES OF AMERICA INC

Firm/Company

13550 VILLAGE PARK DR STE 255

Address

ORLANDO FL 32837

City/State and Zip Code

SUNBIZ.SICONT@HOTMAIL.COM

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

For further information concerning this matter, please call:

DESIREE TORRES at (407) 433-8973
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input 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

(422000204673 3)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

INVERSIONES SAJ 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:13550 VILLAGE PARK DR STE 255
ORLANDO, FL 32837Mailing Address:13550 VILLAGE PARK DR STE 255
ORLANDO FL 32837

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:

ORLANDO REGISTERED AGENTS LLC

Name

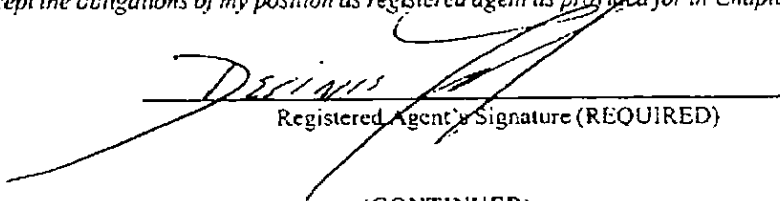
13550 VILLAGE PARK DR, STE 255Florida street address (P.O. Box **NOT** acceptable)ORLANDOFL32837

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)

 2022 JUN 13 AM 11:45
 SECRETARY OF STATE
 TALAHASSEE, FLORIDA

FILED

(H22000204673 3)

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

CARLOS A QUEMBA LUCERO
 13550 VILLAGE PARK DR STE 255
 ORLANDO, FL 32837

AMBR

SOLANGEL SANDOVAL GALVEZ
 13550 VILLAGE PARK DR STE 255
 ORLANDO, FL 32837

(Use attachment if necessary)

2022 JUN 13 AM 11:25
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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.

The company will engage in any and all lawful business allowed in the United States of America and the
 State of Florida

REQUIRED SIGNATURE:*Andres Quemba***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.

CARLOS A QUEMBA LUCERO

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)

eSignature - Certificate of Completion

Document id: CT82TXRN
Signatures: 1
Initials: 0
Signature originator: Desiree Torres (sicont@live.com)
Originator IP address: 108.188.144.101
Time zone: UTC
Document pages: 2

Signers

Signer:	Andres Quemba andresquemba8910@hotmail.com	Signature Andres Quemba <i>Andres Quemba</i>
Signer id:	None	
IP address:	181.140.189.128	
User id:	D9MQD685X	
Timestamp:	Sent - 10/06/2022 02:49 PM Opened - None Signed - 10/06/2022 03:36 PM	

FILED
2022 JUN 13 AM 11:25
CLERK, JUDICIAL OFFICE OF STATE
TALLAHASSEE, FLORIDA