Division of Corporations **Electronic Filing Cover Sheet**

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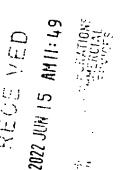
From:

Account Name : FANJUL ENTERPRISES LLC

Account Number : I20190000080 : (305)603-8791 Fax Number : (877)503-6086

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FLORIDA LIMITED LIABILITY CO. OCTAVIO HURTADO COLLS LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OCTAVIO HURTADO COLLS 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 Uttice Address:	Mailing Address:
9657 BLACK WALNUT DR	9657 BLACK WALNUT DR
GROVELAND, FL 34736	GROVELAND, FL 34736

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:

OCTAVIO AUGUS	<u>FO HURTADO CO</u>	LLS
	Name	
9657 BLACK WALI	NUT DR	
Florida street addres	s (P.O. Box <u>NOT</u> a	eceptable)
GROVELAND	FL	34736
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 duffer and familiar with and accept the obligations of my position/of registered/garny as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	PT	ICI	\mathbf{F}	IV.

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	OCTAVIO AUGUSTO HURTADO COLLS 9657 BLACK WALNUT DR
	GROVELAND. FL 34736
	
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the date of filing.) Note: If the date inserted in this block does no	of meet the applicable statutory filing requirements, this date will not be listed
the document's effective date on the Departme	
ADTICLE ST. O.L.	
ARTICLE VI: Other provisions, if any.	⊼
	ASS T
REOUIRED SIGNATURE:	SET. 5
X 🚽	mo p m
Signature of a	member or an authorized representative of a member : N
This document is exc	cuted in accordance with section 605.0203 (1) (b), Floridic statutes.
I am aware that any fa	ree felony as provided for in s.817.155, F.S.
constitutes a tittu deg	rec following as provided for in sign (1.155, 1.15.)
<u>OCTAVIO AL</u>	JGUSTO HURTADO COLLS
	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)