

L22000312063

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.

((H22000236002 3)))



H220002360023A8CF

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 : MARIA XIMENA MARTINEZ
Account Number : I20220000054
Phone : (786)571-4129
Fax Number : (786)590-1744

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.
Richard Alvarez LLC

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

RECEIVED

2022 JUL 14 PM 4:39

FLORIDA
DIVISION OF
CORPORATIONS

2022 JUL 14 AM 2:02

25

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Richard Alvarez 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:

Richard Alvarez

Name of Person

Richard Alvarez LLC

Firm/Company

5449 S Semoran blvd STE 200

Address

Orlando, FL 32822

City/State and Zip Code

INFO@MODERNSOLUTIONSGROUP.NET

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

For further information concerning this matter, please call:

Richard Alvarez

407

813-3581

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 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 of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2023 JUL 14 AM 2:02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Richard Alvarez 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:

5449 S Semoran blvd STE 200
Orlando, FL 32822

Mailing Address:

5449 S Semoran blvd STE 200
Orlando, FL 32822

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:

Richard Alvarez

Name

5449 S Semoran blvd STE 200

Florida street address (P.O. Box **NOT** acceptable)

Orlando

FL

32822

City

State

Zip

2023 JUL 14 AM 2:02

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..

Richard Alvarez

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Richard Alvarez

5449 S Semoran blvd STE 200

Orlando, FL 32822

(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.

The purpose of the Limited Liability Company is to engage in any lawful activity for which a Limited Liability Company may be organized in the state of Florida

REQUIRED SIGNATURE:

Richard Alvarez

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.

Richard Alvarez

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)

2023 JUL 1 A 2:02



July 13, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MARIA XIMENA MARTINEZ

SUBJECT: RICHARD ALVAREZ LLC
REF: W22000092143

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Document has to be in portrait format not landscape.

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

Genesis R Kersey
OPS Clerk

FAX Aud. #: H22000236002
Letter Number: 722A00015669

2022 JUL 14 4:22:02



July 14, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MARIA XIMENA MARTINEZ

SUBJECT: RICHARD ALVAREZ LLC
REF: W22000092428

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Landscape format is not acceptable, please resend portrait format with fax coversheet for processing.

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

Dil Sultana
Regulatory Specialist II

FAX Aud. #: H22000236002
Letter Number: 322A00015728