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Division of Corporations

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Florida Department of State
Division of Corporations
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From:

Account Name : FL PATEL LAW PLLC
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Phone : (727)279-5037
Fax Number : (727)888-1294

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**FLORIDA LIMITED LIABILITY CO.
MTO Solutions LLC**

Certificate of Status	1
Certified Copy	0
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TALLAHASSEE, FLORIDA



COVER LETTER

Wednesday, July 20, 2022

To: New Filing Section
Division of Corporation

Subject:
MTO SOLUTIONS 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:

FL Patel Law PLLC
360 Central Avenue
8th Floor
St. Petersburg, Florida 33701
Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:
Ada Reyes [727-279-5037](tel:727-279-5037) or e-mail at Support@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

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ARTICLES OF ORGANIZATION
FOR
MTO SOLUTIONS LLC
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.
Name

The name of the Limited Liability Company is: MTO Solutions LLC (the “Company”).

ARTICLE II.
Address

The principal office and mailing address of the Company is:

900 River Reach Drive
Apt 304
Fort Lauderdale, FL 33315

ARTICLE III.
Registered Agent, Registered Office, & Registered Agent’s Signature

The name and the Florida Street Address of the Registered Agent are:

Iris Pinedo
900 River Reach Drive
Apt 304
Fort Lauderdale, FL 33315

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.



Iris Pinedo

(sign)

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ARTICLE IV.
Authorized Members and Managers

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
AMBR = Authorized Member MGR = Manager	
<u>MGR</u>	Iris Pinedo 900 River Reach Drive, Apt 304 Fort Lauderdale, FL 33315

ARTICLE V.

The Effective date shall be the date of filing.



(sign)

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.

Iris Pinedo

Authorized Representative/Member

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