

8/29/2022 4:02 PM
C22000376602

Division of Corporations

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.

((H22000291755 3)))



H220002917553ABC0

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 : ANTONIO ALONSO, PLLC.
 Account Number : I20160000045
 Phone : (305)606-0399
 Fax Number : (305)508-6364

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

Email Address: marianagavanegroup@gmail.com

**FLORIDA LIMITED LIABILITY CO.
 SVMLD LLC.**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2022/08/29 PM12:16

STATE OF FLORIDA
 TALLAHASSEE, FLORIDA
 22 AUG 29 PM 12:35

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

DocuSign Envelope ID: 7933FA62-175F-459C-863B-3F82F5EDB639

**ARTICLES OF ORGANIZATION OF
SVMLD LLC.**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I -Name:

The name of the Limited Liability Company is:

SVMLD LLC.

ARTICLE II -Address:

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

332 LOS PINOS PLACE
CORAL GABLES, FL 33143

ARTICLE III -Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent are:

LILIANA VANEGAS PELAEZ
332 LOS PINOS PLACE
CORAL GABLES, FL 33143

ARTICLE IV – 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>
Manager	LILIANA VANEGAS PELAEZ 332 LOS PINOS PLACE CORAL GABLES, FL 33143

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 23 day of December, 2020.

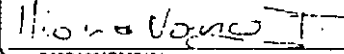
DocuSigned by:

D62DA986B865494
Name: LILIANA VANEGAS PELAEZ

FILED
22 AUG 29 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DocuSign Envelope ID: 7933FA62-175F-459C-865B-3F82F5E0B639

(In accordance with Section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155, F.S.)

DocuSigned by:

087DAB66B285494

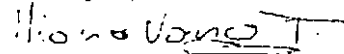
Name: LILIANA VANEGAS PELAEZ

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155, F.S.)

Signature of Registered Agent

DocuSigned by:

087DAB66B285494

Name: LILIANA VANEGAS PELAEZ

FILED
22 AUG 29 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA