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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CLARA GIRALDO ENROLLED AGENT
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

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.
LUISA HERNANDEZ, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

2022 SEP - 1 PM 1:31

2022 SEP - 1 PM 1:31

Electronic Filing Menu

Corporate Filing Menu

Help

Second Request

2022 SEP - 1 AM 9:00

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF
LUISA HERNANDEZ, LLC.**

ARTICLE I - NAME

The name of the Limited Liability Company is:

LUISA HERNANDEZ, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**2625 SW 183 AVE
MIRAMAR, FL. 33029**

The mailing address shall be:

**2625 SW 183 AVE
MIRAMAR, FL. 33029**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

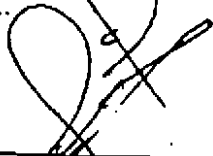
The name and the Florida street address of the registered agent are:

LUISA HERNANDEZ

2625 SW 183 AVE
Florida Street address (P.O. BOX **NOT** acceptable)
MIRAMAR, FL. 33029
City, State, and Zip

2022 SEP - 1 AM 9:00
CLARA OFFICE
MIRAMAR, FLORIDA

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.



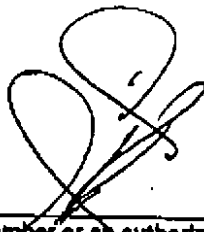
REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

LUISA HERNANDEZ
2625 SW 183 AVE
MIRAMAR, FL 33029

AMBR



Signature of a member or an authorized representative of a member.
(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.)

LUISA HERNANDEZ

2022 SEP -1 AM 9:00
CLERK OF COURT
STATE OF FLORIDA