

L220000445/35

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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HZ

DERGAN ERMER LAW, P.A.

ATTORNEYS & COUNSELORS AT LAW

P.O. Box 746274
Surfside, Florida 33154

Telephone: 305-213-4124
LDErmer@gmail.com

September 30, 2022

Florida Department of State
Division of Corporations
New Filing Section
P.O.Box 6327
Tallahassee, FL 32314

RE: 33 new LLC filings

Dear Sir or Madam,

Enclosed please find the Articles for the filing of thirty-three (33) new LLCs and a corresponding check from our legal office in the amount of \$4.125 representing the filing fee of \$125.00 per filing. I appreciate your attention and assistance with these filings. Should you have any questions or concern, please contact me through via email at LDERMER@gmail.com or phone at (305) 213-4124.

Thank you.

/s/ Lourdes D. Ermer

By: Lourdes Dergan Ermer, Esq. FBN 826601
Dergan Ermer Law, PA

COVER LETTER

**TO: New Filing Section
Division of Corporations**

13986 NE 2 CT, LLC

SUBJECT: _____
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:

LOURDES D. ERMER

Name of Person

DERGAN ERMER LAW, PA

Firm/Company

7900 HARBOR ISLAND DRIVE, NO. 713A

Address

NORTH BAY VILLAGE, FL 33141

City/State and Zip Code

LDERMER@GMAIL.COM

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

For further information concerning this matter, please call:

Lourdes Ermer 305 213-4124

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

13986 NE 2 CT, 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:

3535 South Ocean Drive, Suite 2305
Hollywood, FL 33019

Mailing Address:

3535 South Ocean Drive, Suite 2305
Hollywood, FL 33019

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:

ERIC R. GUILLEN

Name

3535 South Ocean Drive, Suite 2305

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

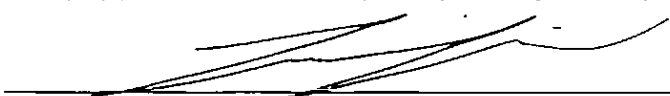
Hollywood, FL 33019

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 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 (REQUIRED)

(CONTINUED)

2022 OCT 11 AM 10:17
TALLAHASSEE, FLORIDA

ARTICLE 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

ERIC R. GUILLEN

3535 South Ocean Drive, Suite 2305
Hollywood, FL 33019

AMBR

SYLVIA E. GUILLEN

3535 South Ocean Drive, Suite 2305
Hollywood, FL 33019

(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.

REQUIRED SIGNATURE:



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.

Eric R. Guillen

Typed or printed name of signer

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)