Division of Corporations Electronic Filing Cover Sheet -

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. STTG CONSULTANTS LLC

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

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Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STTG CONSULTANTS 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:

Princi	pal Off	ice Ad	ldress:
* * * * * * * * * * * * * * * * * * * *	131 OII		· · · · · · · · · · · · · · · · · · ·

Mailing Address:

2408 NW 87 PLACE	2408 NW 87 PLACE
DORAL, FL 33172	DORAL, FL 33172

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:

TEDDY	LUIS ALVARADO		
	Name	 	

2408 NW 87 PLACE

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

DORAL	FL	33172
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..

Teddy alvarado

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	TEDDY LUIS ALVARADO
	2408 NW 87 PLACE
	DORAL, FL 33172
AMDD	WILLIAM ALEXANDER LOPEZ
AMBR	2408 NW 87 PLACE
	DORAL FL 33172
(Use attachment if necessary)	
,	
CLE V: Effective date, if other than the	date of filing: 01/01/23 (OPTIONAL)
effective date is listed, the date must be	e specific and cannot be more than five business days prior to or 90 days aft
ate of filing.)	•
If the date inserted in this block does n	ot meet the applicable statutory filing requirements, this date will not be listed
cument's effective date on the Departm	
CLE VI: Other provisions, if any.	
· · · · · · · · · · · · · · · · · · ·	

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.

TEDDY LUIS ALVARADO

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)

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From: Yanet Avila