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1/11/23, 12:57 PM

Division of Corporations

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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.

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To:

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

From:

Account Name : YOUR DREAM SERVICES CORP.  
Account Number : I20200000137  
Phone : (786)660-0108  
Fax Number : (786)354-1047

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

Email Address: info@yourdreamms.com

FLORIDA LIMITED LIABILITY CO.  
GJC Multiservices LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

FILED  
2023 JAN 11 AM 9:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/11/23 11:11 PM

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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: GJC Multiservices LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlos Enrique Pacheco Pacheco

Name of Person

*Carlos Enrique Pacheco Pacheco*  
Firm/Company

6415 Nw 102nd Path Unit 204

Address

Miami Florida 33178

City/State and Zip Code

araujojoseluis@hotmail.com

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

For further information concerning this matter, please call:

Jose Araujo

786

8300203

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ((01230000137953))

ARTICLE I - Name:

The name of the Limited Liability Company is:

GJC Multiservices 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:

Mailing Address:

6415 Nw 102nd Path

6415 Nw 102nd Path

Unit 204

Unit 204

Miami Florida 33178

Miami Florida 33178

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:

Your Dream Multiservices Corp

Not

8300 Nw 53rd St Ste 350

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

Miami

Florida

33166

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company, I, Isamar Torres, do hereby accept the appointment as registered agent and agree to act in its capacity as registered agent and 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.

Isamar Torres

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Carlos Enrique Pacheco Pacheco  
6415 Nw 102nd Path Unit 204  
Miami Florida 33178

MGR

Jose Luis Araujo Pacheco  
6415 Nw 102nd Path Unit 204  
Miami Florida 33178

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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.

Any and All Lawful Business


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

Carlos Enrique Pacheco Pacheco

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.

Carlos Enrique Pacheco Pacheco

Typed or printed name of sign 

**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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