CZ3000084106

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Copies Certificates of Status
·
. Instructions to Filing Officer:

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JANGE SURPORATIONS
FALLAMASSEE, FLORIDA

RECEIVED

COVER LETTER

	New Filing Sec Division of Co				
elib ie <i>c</i>		& BLESSED LLC			
SUBJEC	.1:	Name of Lim	ited Liabili	ty Company	
The enclo	osed Articles of	Organization and fee(s) are	submitted	for filing.	
Please re	tum all correspo	ondence concerning this mat	ter to the fo	ollowing:	
	MIGUEL A	. RODRIGUEZ ROJAS			
	-	<u>-</u>	Name of	Person	
	BARAK &	BLESSED LLC			
			Firm/Co	mpany	<u> </u>
	5770 WEST	IRLO BRONSON MEM	ORIAL HV	VY STE 413	
		· · · · · ·	Addr	ess	
	KISSIMME	E. FL 34746			
	in fo Gioback		ty/State an	d Zip Code	
	info@jcbsolu	E-mail address: (to be used t	for future a	nnual report notification	on)
For further		ncerning this matter, please			
	MIGUEL A.		6	296-1833	
	Nan	ne of Person Ar	ea Code	Daytime Telephone	e Number
Enclosed	is a check for t	he following amount:			
□\$125.6	X) Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division	ng Address iling Section on of Corporations ox 6327		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree	ssee
		assee, FL 32314		Tallahassee, FL 32303	

ARTICLESOFORGANIZATIONFORFLORIDALIMITEDLIABILITYCOMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
BARAK & BLESSED LLC		
(Must contain the words "Lim	ited Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Li	mited Liability Company is:
Principal Office Address	:	Mailing Address:
5770 WEST IRLO BRONSON MEMORI SUITE 413	AL HWY	5770 WEST IRLO BRONSON MEMORIAL H SUITE 413
KISSIMMEE, FL 34746		KISSIMMEE, FL 34746
The name and the Florida street address of the regis	lutions Inc	
	Name	
7500 NW 25th	ST Suite 237	
Florida street a	ddress (P.O. Box 🛚	(OT acceptable)
Doral, Florida 3	3122	
City	State	Zip
Having been named as registered agent and to accepolace designated in this certificate, I hereby accept the further agree to comply with the provisions of all state an familiar with and accept the obligations of my positions.	appointment as reg ites relating to the p	istered agent and agree to act in this capacity. I proper and complete performance of my duties, and I
		4
R	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:

"AMBR" = Authorized Member				
"MGR" = Manager				
<u>-</u>				
MGRM	MIGUEL A. ROORIGUEZ-ROJAS 5770 WEST IRLO BRONSON MEMORIAL HWY SUITE 413			
	KISSIAMEE, PL 34746			
MGRM	CATHERINE MEJIA-VELASQUEZ			
10:54	5770 WEST IRLO BRONSON MEMORIAL HWY SUITE 413			
	KISSIMMEE, FL 34746			
	20			
	2025			
	<u> </u>			
	<u> </u>			
	ν. Γ			
				
(Use attachment if necessary)				
(Ose attachment if necessary)	f 			
LEV: Effective date, if other than the da	ite of filing:			
of filing.) the date inserted in this block does not iment's effective date on the Department. EVI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not not of State's records.			
22 7 23 Other provisionis, it dity.				
REQUIRED SIGNATURE:				
	71.7.1			
	Man Bigs			
REOUIRED SIGNATURE:	Many Bigs			
Signature of a r This document is exect 1 am aware that any fa	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. Use information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.			
Signature of a r This document is exect am aware that any fa	cuted in accordance with section 605,0203 (1) (b), Florida Statutes, lse information submitted in a document to the Department of State			

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)