23000109391

(Requestor's Name)	
(Address)	
(
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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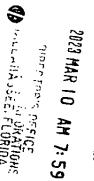
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SECRETARY OF STATE
TALLAHASSEE, FL

23 HAR IN PM 9: 51

03/10/23--01001--017 **505.00



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ABRAHAN CONG	CRETE LLC			
(Must co	ntain the words "Limited Li	ability Company, "L.1	L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal offi	ice of the Limned Lia	bility Company is:	
Principal Office Address:			Mailing Address:	
2012 OAK STREET		2012 (0)	AK STREET	
THE CURN STREET	SAINT CLOUD, FLORIDA 34769			
SAINT CLOUD. I ARTICLE III - Registered A The Limited Liability Compa	LORIDA 34769 sgent, Registered Office. & ny cannot serve as its own R	: Registered Agent's Registered Agent, You	CLOUD, FLORUDA 34769 Signature: (must designate an individual or	
SAINT CLOUD, I ARTICLE III - Registered A The Limited Liability Compa another business entity with a	LORIDA 34769 sgent, Registered Office. & ny cannot serve as its own R n active Florida registration et address of the registered a	: Registered Agent's Registered Agent, You .) ngent are:	Signature:	
SAINT CLOUD, 1	LORIDA 34769 gent, Registered Office. & ny cannot serve as its own R n active Florida registration et address of the registered a	: Registered Agent's Registered Agent, You of the Agent are: REZ	Signature:	
SAINT CLOUD, I ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	LORIDA 34769 gent, Registered Office. & ny cannot serve as its own R n active Florida registration et address of the registered a	: Registered Agent's Registered Agent, You .) ngent are:	Signature:	
SAINT CLOUD, I ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	LORIDA 34769 seent, Registered Office. & ny cannot serve as its own R n active Florida registration et address of the registered a YAREMYS LIMA PE 2012 OAK STREET	: Registered Agent's Registered Agent, You agent are: IREZ Name	Signature: i must designate an individual or	
SAINT CLOUD, I ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	LORIDA 34769 sgent, Registered Office. & ny cannot serve as its own R n active Florida registration et address of the registered a	: Registered Agent's Registered Agent, You agent are: IREZ Name	Signature: i must designate an individual or	
SAINT CLOUD, I ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	LORIDA 34769 seent, Registered Office. & ny cannot serve as its own R n active Florida registration et address of the registered a YAREMYS LIMA PE 2012 OAK STREET	: Registered Agent's Registered Agent, You agent are: IREZ Name	Signature: i must designate an individual or	

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)

2023 HAR TO PH 2: 20

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	í
"MGR" = Miniager	
MGR	YAREMYS LIMA PEREZ
	2012 OAK STREET SAINT CLOUD, FLORIDA 34769
	SAINT CLOUD, PLOKIDA 34707
(Use attachment if necessary)	
(If an effective date is listed, the date mu the date of filing.)	the date of filing: 03/07/2023
ARTICLE VI: Other provisions, if any,	
	NTIAL AND COMMERCIAL
5 (10 (10 (10 (10 (10 (10 (10 (1	7.11.11.11.11.11.11.11.11.11.11.11.11.11
REQUIRED SIGNATURE:	· '
	المستر
	<u> </u>
This document I am aware that	of a member of an authorized representative of a member, is executed in accordance with section 605,0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State and degree felony as provided for in s.817,155, F.S.
YAREM	YS LIMA PEREZ
1.718312334	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)