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(((H23000091682 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : MARIA XIMENA MARTINEZ

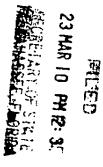
Account Number : I20220000054 Phone : (786)571-4129 : (786)590-1744 Fax Number

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

Email	Address	:					

FLORIDA LIMITED LIABILITY CO. BLACK & WHITE INVESTORS LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00



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Help

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COVER LETTER

	New Filing Sec Division of Co					
cupico		BLACK & WHITE INVEST	DRS LLC			
SUBJEC	1:	Name of Lin	nited Liabili	ity Company		
The enclo	sed Articles of	Organization and fee(s) are	e submitted	for filing.		
Please ret	urn all corresp	ondence concerning this ma	itter to the f	ollowing:		
		MAF	RIA XIMEN	A MARTINEZ		
			Name of	Person		
		MODER	N SOLUT	ONS GROUP		
	,		Firm/Co	mpany		
		2424 V	V. BRANDO	ON BLVD #1282		
	,		Addro	285		
		£	BRANDON	, FL 33511		
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		E-mail address: (to be used				
For further	information co	ncerning this matter, please	call:			
	MARIA XIMI	ENA MARTINEZ	786	571-4129		
		at (rea Code) Daytime Telephon	e Number	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
BLACK & WHITE INVESTORS LLC	
(Must contain the words "Limited Liabi	ility 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:
4537 W IDLEWILD AVE	4537 W IDLEWILD AVE
TAMPA FL 33614	TAMPA FL 33614
ARTICLE III - Registered Agent, Registered Office, & R	egistered Agent's Signature:
(The Limited Liability Company cannot serve as its own Reg	
another business entity with an active Florida registration.)	
The name and the Florida street address of the registered age	nt are:
LINNIS CABRERA MART	INEZ
Na	me

4537 W IDLEWILD AVE Florida street address (P.O. Box NOT acceptable)

State City

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.,

LINNIS CABRERA MARTINEZ

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:

"MGR" = Mai	authorized Member	
	inager	
MGR	NALLY MUSTAFA CALZADO	
	4537 W IDLEWILD AVE	
	TAMPA FL 33614	
MGR	LINNIS CABRERA MARTINEZ	
	4537 W IDLEWILD AVE	
	TAMPA FL 33614	
		
		
		
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