4/18/23, 4:10 PM

# Division of Corporations Copolations Electronic Filing Cover Sheet

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Division of Corporations

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# FLORIDA LIMITED LIABILITY CO. FLORIDA SOLAR HOME LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help



### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FLORIDA SOLA	AR HOME LLC			
(Must c	contain the words "Limited	Liability Company,	L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and stree	et address of the principal	office of the Limited	Liability Company is:	
Prin	cipal Office Address:		Mailing Address	<b>!</b>
7425 N AUGUST	ra dr			
HIALEAH, FL 3	3015	SAM	Ë	<del></del>
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own	& Registered Agen	t's Signature:	dual or
ARTICLE III - Registered (The Limited Liability Comp	Agent, Registered Office, any cannot serve as its own an active Florida registrati	, & Registered Agent. \ on.)	t's Signature:	202
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registrati	, & Registered Agent. \ n Registered Agent. \ nn.) d agent are:	t's Signature:	202
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ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registrative and address of the registere GEORGE X TOVA	, & Registered Agent n Registered Agent. You) d agent are:  R  Name	t's Signature: ou must designate an indivi	2023 APR 18

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.

> Gorge X. Towar Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

ARTIC	T F TV_

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	GEORGE X TOVAR	
LUCION	3940 NW 79TH AVE UNIT 123	
	INALEAH. FL 33166	
·		
(Use attachment if necessary)	_	_
	date of filing: (OPTIONAL) (OPTIONAL) especific and cannot be more than five business days prior to or 90 days.	<b>2</b>
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)_	
(If an effective date is listed, the date must be	e specific and cannot be more than five business days prior to or 90 days	after T
the date of filing.)		70
	not meet the applicable statutory filing requirements, this date will-not be li	sted as
the document's effective date on the Departm	nent of State's records.	م اسما
ADTICE DAME Oder and delegate	<u>δ</u> .	_ 111
ARTICLE VI: Other provisions, if any.	SIS	罡 一
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	rT.	

### REQUIRED SIGNATURE:

Gorge X. Towar

Signature of a member or un 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.

GEORGE X. TOVAR

Typed or printed name of signee

## Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)