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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	-





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COVER LETTER

	egistration Section ivision of Corporations	
SHD IECT	ES BRAVO ELECTRIC LLC	
SUBJECT	: Name of L	imited Liability Company
The enclos	ed Articles of Organization and fee(s)	are submitted for filing.
Please retu	rn all correspondence concerning this i	natter to the following:
	ESDRAS EZEQUIEL BRAVO BAN	1ACA
		Name of Person
	ES BRAVO ELECTRIC LLC	
		Firm/Company
	4610 ELDERBERRY DRIVE	
		Address
	ORLANDO, FLORIDA 32809	
	SULEYMABAMACA@GMAIL.CO	City/State and Zip Code
		ed for future annual report notification)
For further i	nformation concerning this matter, plea	ase call:
	ESDRAS EZEQUIEL BRAVO B	407 209-6273
	at (Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:	
	iling Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 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 of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ES BRAVO ELE			
(Must e	nd with the words "Limited L	iability Company, "L	L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stree	et address of the principal offi	ice of the Limited Lia	bility Company is:
<u>Prin</u>	cipal Office Address:		Mailing Address:
4610 ELDERBEE	4610 ELDERBERRY DRIVE		DERBERRY DRIVE
ORLANDO, FL 32809		ORLANDO, FL 32809	
ARTICLE III - Registered . The Limited Liability Companother business entity with a	Agent, Registered Office, & any cannot serve as its own R an active Florida registration.	Registered Agent's degistered Agent, You	Signature:
ARTICLE III - Registered . The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration.	Registered Agent's (legistered Agent, You)	Signature:
ARTICLE III - Registered . The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. PEDRO BERNARDO	Registered Agent's (legistered Agent, You) (legistered Agent, You) (legent are:	Signature:
ARTICLE III - Registered . The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. PEDRO BERNARDO	Registered Agent's (legistered Agent, You)	
ARTICLE III - Registered . The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. PEDRO BERNARDO 4610 ELDERBERRY I	Registered Agent's degistered Agent, You degent are: PEREZ DIAZ Name DRIVE	Signature: n must designate an individual o
ARTICLE III - Registered . The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. eet address of the registered a PEDRO BERNARDO	Registered Agent's degistered Agent, You degent are: PEREZ DIAZ Name DRIVE	Signature: n must designate an individual o
ARTICLE III - Registered . The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. PEDRO BERNARDO 4610 ELDERBERRY I	Registered Agent's degistered Agent, You degent are: PEREZ DIAZ Name DRIVE	Signature: i must designate an individual

ı, norther 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.,

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager <u>MGR /OWNER</u>	ESDRAS EZEQUIEL BRAVO BAMACA 4610 ELDERBERRY DRIVE ORLANDO, FL 32809
AMBR	SUGEIRI FABIOLA BAMACA MENDOZA 4610 ELDERBERRY DRIVE ORLANDO FLORISA 32809
(Use attachment if necessary)	
If an effective date is listed, the date must be speed ate of filing.)	e of filing: 05/01/2023 (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as t of State's records.
ARTICLE VI: Other provisions, if any. ELECTRIC SUB CONTRACTOR	
REQUIRED SIGNATURE:	Thurst of the second of the se
Signature of a m This document is executed a management of the supplies of the	number or an authorized representative of a member, ated in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.
ESDRAS EZEC	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)

8 5.00 Certificate of Status (Optional)

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