5/31/23, 10:48 AM

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Phone Fax Number : (305)328-4774

**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. STRUCTURAL METAL BUILDING, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help



MIAMI, FL 33196

To:

,	
ARTICLES OF ORGANIZATION FOR E	LORIDA LIMITED LIABILITY COMPANY
RTICLE I - Name:	
he name of the Limited Liability Company is:	•
STRUCTURAL METAL BUILDING, LLC (Must contain the words "Limited L	.iability Company, "L.L.C.," or "LLC.")
RTICLE II - Address: the mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
15420 SW 136 STREET	15420 SW 136 STREET
UNIT 43	UNIT 43

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

City	State	Zip
МАМІ	FL	33196
Florida street add	ress (P.O. Box <u>NOT</u> a	eceptable)
15420 SW 136 ST	REET UNIT 43	
	Name	
GUSTAVO ADO	LFO VARGAS	

MIAMI, FL 33196

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)

From: Yanet Avila

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	GUSTAVO ADOLFO VARGAS
	15420 SW 136 STREET UNIT 43 MIAMI, FL 33196
AMBR	MIGUEL ABRAIRA MARTIN 15420 SW 136 STREET UNIT 43
	MIAMI, FL 33196
····	
	
(Use attachment if necessary)	
01 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	date of filing: (OPTIONAL)
CLE V: Effective date, if other than the d	date of hing (OPTIONAL)
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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)