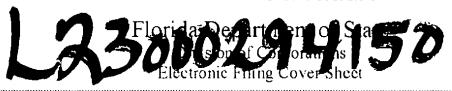
5/19/23, 12.03 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000218519 3)))



H230002185193ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CESPEDES CPA, INC

Account Number : 120220000109

Phone : (786)452-4615

Fax Number : (844)773-3487

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

Email Address: manoloian2004@yahoo.com

FLORIDA LIMITED LIABILITY CO. INVERSIONES WAAL LLC

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

Electronic Filing Menu Corporate Filing Menu

Help



(((H23000218519 3))) ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

INVERSIONES WAAL LLC				
(Must co				
ARTICLE II - Address: The mailing address and stree	rt address of the principal office of the	e Limited Liability	y Company is:	
Principal Office Address:		Mailing Address:		
5252 N	W 85th AVE #512	5252	NW 85th AVE # 51	.2
DC	DRAL FL 33166	DORAL FL 33166		
•	an active Florida registration.)		st designate an individu	
•	eet address of the registered agent are	:: LVAREZ LOPEZ		
•	eet address of the registered agent are	: :		
·	cet address of the registered agent are WALDO A. Al	:: LVAREZ LOPEZ		
•	cet address of the registered agent are WALDO A. Al	:: LVAREZ LOPEZ rame ith AVE # 512		
•	eet address of the registered agent are WALDO A. Al N 5252 NW 85	:: LVAREZ LOPEZ rame ith AVE # 512		
·	waldows of the registered agent are Waldo A. Al N 5252 NW 85 Florida street address (P.O. Bo	EXAREZ LOPEZ Tame Sith AVE # 512 OX NOT acceptab	le)	ompany at the scapacity. I my dialies, and I my dialies, and I my dialies.
The name and the Florida structure of the structure of th	WALDO A. Al WALDO A. Al N 5252 NW 85 Florida street address (P.O. Bo DORAL City red agent and to accept service of proceeding, I hereby accept the appointment of the provisions of all statutes relating to	LVAREZ LOPEZ Tame Sith AVE # 512 OX NOT acceptable FL State Cess for the above as registered agen the proper and co	le) 33166 Zip stated limited lious and agree to acomplete performan	bility c u In thi nce of
The name and the Florida structure for the name and the Florida structure for the name of the florida structure for the name of the name o	WALDO A. Al WALDO A. Al N 5252 NW 85 Florida street address (P.O. Bo DORAL City red agent and to accept service of proceeds, I hereby accept the appointment of	LVAREZ LOPEZ Tame Sith AVE # 512 OX NOT acceptable FL State Cess for the above as registered agen the proper and co	le) 33166 Zip stated limited liability contained agree to act in this implete performance of i	ompany at the seapoetry. I

(CONTINUED)

(((H23000218519 3)))

Title: "AMBR" = Authorized Men	Name and Address:	
"MGR" = Manager AMBR	WALDO A. ALVAREZ LOPEZ	
	5252 NW 85th AVE # 512	
	DORAL FL 33166	
······		
(Use attachment if necessary)	
LE V: Effective date, if other t	than the date of filing: (OPTIONAL)	
e of filing.)	must be specific and cannut be more than five business days prior to or 90 d	
If the date inserted in this bloc cument's effective date on the	k does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	e listed : ∑∵
CLE VI: Other provisions, if any	;	
		-
REQUIRED SIGNATURE		
51250-513 × 1250 × 15, 0	RES, 17 H L	
Signa	ture of a member or an authorized representative of a member, ent is executed in accordance with section 605.0203 (1) (b), Florida Statutes.	

Typed or printed name of signee