7/10/23, 10 02 AM

Division of Corporations I Prida Carpendo Fit Supplies The Corporations Division of Corporations Division of Corporations Line Corporations Electronic Filing Cover Sheet

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.

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Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 Phone : (954)384-8565 Fax Number : (954)302-4976

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

Email Address: FLOPEZ@EFLATINACCOUNTING.COM

RECEIVED 23 July 10 Pm/2: 14



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Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	New Filing Section Division of Corporations		
SUBJEC	CT. COLANGELO CONSTRUCTION GROUP LLC		
SOBJE	Name of Limited Liability Company		
The enci	losed Articles of Organization and fee(s) are submitted for filing.		
Please re	eturn all correspondence concerning this matter to the following:		
	DIEGO FIGUEROA		
	Name of Person		
	E & F LATIN GROUP LLC		
	Firm/Company	- Zo	2
	1820 N CORPORATE LAKES BLVD SUITE 109		3 JUI
	Address	£237	50 :
	WESTON FL 33326		7
	City/State and Zip Code		50.15
	DIEGO@EFLATINACCOUNTING.COM E-mail address: (to be used for future annual report notification)		5.0
For furthe	er information concerning this matter, please call:		
	DIEGO FIGUEROA 954 384 8565		
	DIEGO FIGUEROA at (954) 384 8565 Name of Person Area Code Daytime Telephone Number		
Enclose	d is a check for the following amount:		
□ \$125.	.00 Filing Fee \$\Bigsis \$130.00 Filing Fee & \Bigsis \$155.00 Filing Fee & \Bigsis \$160.00 Fil	of Status & opy	c d)
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of TallahasseeP.O. Box 63272415 N. Monroe Street, Suite 810Tallahassee, FL 32314Tallahassee, FL 32303		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COLANGELO CONSTRUCTION GROUP LLC

(Must contain the words "Limited Liability 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:

Malling Address:

10277 NW 46TH STREET	10277 NW 46TH STREET
SUNRISE, FL 33351	SUNRISE, FL 33351

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:

E & F LATIN GROUP LLC

1820 N CORPORATE LAKES BLVD SUITE 109

Florida street address (P.O. Box NOT acceptable)

WESTON FLORIDA 33326
City State Zip

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 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)

ARTICLE IV-

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MOR" = Manager			
MGR	ALESSANDRO COLANGELO		_
	10277 NW 46TH STREET SUNRISE, FL 33351		_
	30NRISE, FL 33331		_
MGR	GIUSEPPE COLANGELO		
	10277 NW 46TH STREET		_
	SUNRISE, FU 33351	-	_
MGR	NATHALIA MARGARITA MARTINEZ		
	10277 NW 46TH STREET		_
	SUNRISE, FL 33351		-
			
			_
(Use attachment if necessary)		$\mathcal{F}_{\mathcal{O}}$	~
FIGURE V. Formation data if asked shows that	Annual Control	الانتار الكركامان	ω,
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ICLE VI: Other provisions, if any.		۔ ز	ö
REOUIRED SIGNATURE:			
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE: Signature of	friember or an authorized representative of a member.		
REQUIRED SIGNATURE: Signature of a This document is ex	ecuted in accordance with section 605,0203 (1) (b), Florida	Statutes	
REQUIRED SIGNATURE: Signature of a This document is ex I am aware that any		Statutes	
REQUIRED SIGNATURE: Signature of a This document is ex I am aware that any	ecuted in accordance with section 605.0203 (1) (b), Florida false information submitted in a document to the Department gree felony as provided for in s.817.155, F.S.	Statutes	
REQUIRED SIGNATURE: Signature of a This document is ex I am aware that any	ecuted in accordance with section 605.0203 (1) (b), Florida false information submitted in a document to the Department	Statutes	

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)