Division of 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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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019

Phone

: (305)552-5973

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**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. COUNTY TRANSFER LLC

Certificate of Status	
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	
ARTICLE I - Name:	~
The name of the Limited Liability Compa	
Compa	any is:
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ARTICLE II - Address:	
The mailing add	
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-pany is.	of the principal office of the Limited Liability
	THE COUNTY
-14341 SW 250	
- 14341 SW 258 Lanu	<u># 2205</u>
- Homestead Fl 22	# 2205
3032	
ARTICLE III D	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of	d Office
The name and the Florida street address of Company cannot serve as its own Registered Agent. You must a with an active Florida registration.)	f the rest is a
with an active Florida	title registered agent are: The I mited to late
Company cannot serve as its own Registered Agent. You must a with an active Florida registration.)	designate an individual or another business entity
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Arelic Redriguez Chavez	,
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Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b). Florida Statutes, the execution ϵ f this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

All I ledge of Typed or printed name of signee

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 herely 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)