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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**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 : PEREZ ARCHE AN ACCOUNTING & TAX SERVICES INC

Account Number : I20070000033 Phone : (305)649-7040 Fax Number : (305)649-0477

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

Email Address: Oroncaled @ amail. Com

3SEP-6 PH 3:1

FLORIDA LIMITED LIABILITY CO.
MAGNETA LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

FALL / See Thomas

Electronic Filing Menu

Corporate Filing Menu

Help

## **COVER LETTER**

TO:	New Filing Section
	Division of Corporations

SUBJECT:

The enclosed Articles of Organization and fee(s) are submitted for filing.

Page: 3 of 6

Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

E-mail address: (to be used for future annual report notification)

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$160.00 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLE I - Name:

The name of the Limited Liability Company is:

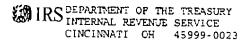
## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and to om 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)	MAGNETA LLC	
The mailing address and street address of the principal office of the Limited Liability Company is:    Principal Office Address:   Mailing Address	(Must contain the words "Limited Liability Company, "L.I.,C.," or "LLC.")	
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:    April 18		
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:    How Tsabel Aearca   Name	Principal Office Address: Mailing Address:	
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:    Ana Tsabel Aearca	15393 SW 90th toward 4011 W FLAGIER ST	
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:    Ana Tsabel Aearca	MIRMI - FL 33196 STE 501	t I
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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 om 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)	(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or	
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Florida street address (P.O. Box NOT acceptable)  Cen GABES 71 33134  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 I form 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)	$\sim$ 1.0	
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## ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager  AMBR	ALEXANDER MEND	OZA AZE	
AMBR	DIEGO MENDUZA	<u> </u>	
AMBR	LEONEL MENDUZA	ZACE_	
AMBR	LEDA GOTERA 15393 SW 90 M TERR MIRMI - FL 3319L	ACE	
(Use attachment if necessary)			
he date of filing.)	specific and cannot be more than five business days prior meet the applicable statutory filing requirements, this daint of State's records.		
REQUIRED SIGNATURE:	Anauaica		
This document is exe I am aware that any fa	member or an authorized representative of a member, icuted in accordance with section 605.0203 (1) (b), Florida also information submitted in a document to the Department ree felony as provided for in s.817.155, F.S.	Statutes.	
	Tenbel APATCA Typed or printed name of signee	IALI A	20 <b>22</b> SE
\$ 30.00 Certified Copy (Optional		; ;	0 - C
\$ 5.00 Certificate of Status (Opt	ional)	O.: 1	AR L



Date of this notice: 09-06-2023

13054897704

Employer Identification Number: 93-3265716

Form: SS-4

Number of this notice: CP 575 B

MAGNETA LLC DIEGO MENDOZA MBR 15393 SW 90TH TER MIAMI, FL 33196

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 93-3265716. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did not apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Form 1065

03/15/2024

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Nethods.

We assigned you a tax classification (corporation, partnership, estate, trust, EPMF, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If-you want a legal determination of your tax classification, you may request a private lefter ruling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B.-1 (or Revenue Procedure 2020-1, 2020-1 I.R.B.-1) superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. 4 See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form=8832.