

L23000476718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

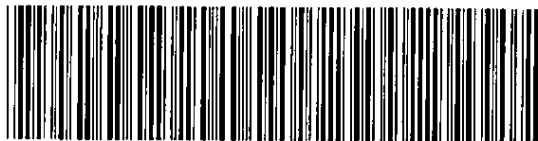
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

10/11/23

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S CHATHAM

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Emiled 10/10/23

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2023

MARTHA OTALORA
175 FOUNTAINBLEAU BLVD, SUITE 1-G2
MIAMI, FL 33172 US

SUBJECT: AIRFIX DYNAMICS LLC
Ref. Number: W23000130241

We have received your document for and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The suffix and fee amount indicates you wish to form a limited liability company, however, you submit Articles of Incorporation which is strictly for profit or non-profit corporation. Attached is Articles of Organization for your convenience.,

Chapter 605, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Regulatory Specialist III
Director's Office

Letter Number: 423A00022050

COVER LETTER

W23000130241

TO: New Filing Section
Division of Corporations

SUBJECT: AIRFIX DYNAMICS LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

MARTHA OTALORA

Name of Person

MO ACCOUNTING SERVICES CORP

Firm/Company

175 FONTAINEBLEAU BLVD SUITE 1-G2

Address

MIAMI - FLORIDA 33172

City/State and Zip Code

info@moaccountingservices.com

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

For further information concerning this matter, please call:

MARTHA OTALORA 786 612-5021
Name of Person at Area Code Daytime Telephone Number

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)

M.O ACCOUNTING SERVICES CORP 175 FONTAINEBLEAU BLVD. STE 1G-2 MIAMI, FL 331727018		63-9413/2670	364
DATE 08/25/23		810	
PAY TO THE ORDER OF Division of Corporations		\$ 125=	
One hundred twenty-five dollars		DOLLARS	
CHASE JPMorgan Chase Bank, N.A. www.Chase.com			
Airfix Dynamics LLC			
⑆ 267084131⑆		269655129⑆0354	

W23000-130 241.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AIRFIX DYNAMICS 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:

7329 NW 56TH AVENUE
MIAMI, FLORIDA 33166

Mailing Address:

7329 NW 56TH AVENUE
MIAMI, FLORIDA 33166

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:

ROBERTO MORA MEJIA

Name _____

3942 NW 84TH WAY

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

COOPER CITY

FLORIDA

33024

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

- DocuSigned by:

ROBERTO MORA MENA

Registered Agent's Signature (REQUIRED)

(CONTINUED)

W23 000130241

ARTICLE IV-

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

Title:

"AMBR" - Authorized Member

"MGR" = Manager

Name and Address:AMBR
ROBERTO MORA MEJIA
3942 NW 84TH WAY
COOPER CITY, FLORIDA 33024
AMBR
RICARDO A. PEREIRA CAMACHO
2831 NW 51ST TERRACE
MARGATE, FLORIDA 33063
AMBR
JORGE I. CONTRERAS OYUELA
1717 WHITEHALL DR APT 206
DAVIE, FLORIDA 33324

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 22, 2023 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

ROBERTO MORA MEJIA.....40%RICARDO A. PEREIRA CAMACHO.....30%JORGE I. CONTRERAS OYUELA.....30%**REQUIRED SIGNATURE:**

DocuSigned by:

ROBERTO MORA MEJIA

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ROBERTO MORA MEJIA

Typed or printed name of signer

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)