Division of Corporations Electronic Filing Cover Sheet

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	Division of Corporations			707
	Fax Number	: (850)617-6381		7
From:			TARY IASSE	H.M.
	Account Name	: EXPRESS CORPORATE FILING SERVICE INC.	SSE	ယ
	Account Number	: I2000000146	.m-<	
	Phone	: (305)444-4994	<u>_</u>	
	Fax Number	: (305)328-4774	81A.	
Enter	the email addres	s for this business entity to be used for futu	re 🖳	59
		ngs. Enter only one email address please.**		

FLORIDA LIMITED LIABILITY CO. TASKO MEP SERVICES HOLDING COMPANY LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

1-31-24

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TASKO MEP SERVIC	ES HOLDING COME	DANVIIC	
	n the words "Limited L		"L.L.C.," or "LI.C.")
CLE II - Address: ailing address and street add	ress of the principal of	fice of the Limited	Liability Company is:
<u>Principal</u>	Office Address:		Mailing Address:
2345 SW 26 STREET		234:	SW 26 STREET
MIAMI, FL 33133			
MIAMI, FL 33133 CLE III - Registered Agent imited Liability Company car business entity with an act	annot serve as its own I	& Registered Age Registered Agent.	
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CLE III - Registered Agent imited Liability Company or business entity with an act one and the Florida street ad	annot serve as its own I live Florida registration dress of the registered FRANCISCO ENRIQ 2345 SW 26 STREET	k Registered Age Registered Agent. a.) agent are: UEZ Name	nt's Signuture: You must designate an individu

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..

/s/ Francisco Curique?

Registered Agent's Signature (REQUIRED)

(CONTINUED)



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 <u>AMBR</u>	TASKO PLUMBING AND MECHANICAL SERVICE LLC 2345 SW 26 STREET MIAMI, FL 33133
(If an effective date is listed, the date must be the date of filing.)	ate of filing:
REQUIRED SIGNATURE:	
This document is exec I am aware that any fa	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes, lise information submitted in a document to the Department of State rec felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Section 100

FRANCISCO ENRIQUEZ

S 5.00 Certificate of Status (Optional)