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ALLAHASSEE, FLORID

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COVER LETTER

	Gew Filing Sec Division of Co				
SUBJECT	**	DO MOTORS			
SOBILO	'	Name of Li	mited Liab	lity Company	
The enclos	sed Articles of	Organization and fee(s) a	re submitte	d for filing.	
Please rett	urn all correspo	ondence concerning this n	natter to the	following:	
	FRANCISC	O ALVARADO			
		· · · · · · · · · · · · · · · · · · ·	Name o	f Person	
			Firm/C	ompany	
	2536 TINY	LEAF RD			
			Ado	ress	
	TALLAHAS	SSEE, FL 32305			
	AFRAN3753	@GMAIL.COM	City/State a	nd Zip Code	
		E-mail address: (to be use	d for future	annual report notificat	ion)
For further	information co	oncerning this matter, plea	se call:		
	FRANCISCO		350	390-0366	
	Nan	······································		Daytime Telephor	ne Number
Enclosed i	is a check for t	he following amount:			
□\$125.00	0 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F	ng Address Filing Section on of Corporations		Street Address New Filing Section D The Centre of Tallah	

P.O. Box 6327 Tallahassee, Ft. 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Λ	ĸ.	T'I	C	1 1	FI	۱ ـ	Na	me:
7 B	"		٧	B.4		-	1 1 61	

The name of the Limited Liability Company is:

ALVARADO MOTORS 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:	<u>Mailing Address</u> :
2536 TINY LEAF RD.	2536 TINY LEAF RD
TALLAHASSEE, FL 32305	TALLAHASSEE, FL 32305

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:

CAPITAL CITY CAR	RIERS AND SER	VICES LLC
	Name	
3219 BODMIN MOO	R DR	
Florida street address	(P.O. Box <u>NOT</u> ac	cceptable)
TALLAHASSEE	FL.	32317
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..

Saudra Concepción

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

<u>Title:</u>		Name and Address:
	uthorized Member	
"MGR" = Ma	ınager	
<u>MGR</u>		FRANCISCO ALVARADO
		2536 TINY LEAF RD
		TALLAHASSEE, FL 32305
		
		
(Use attachm	ent if necessary)	
	• • •	
ARTICLE V: Effectiv	e date, if other than the date of t	iling: (OPTIONAL)
(If an effective date is	listed, the date must be specif	ic and cannot be more than five business days prior to or 90 days after
the date of filing.)	•	, , , , , , , , , , , , , , , , , , ,
	ted in this block does not meel	the applicable statutory filing requirements, this date will not be listed as
	ve date on the Department of S	
ARTICLE VI: Other p	rovisions, if any.	
REQUIRED	SICINATION TO STATE OF THE STAT	
	1 <i>441</i>	
	FAFSAA7E12E7434	
	Signature of a memb	er or an authorized representative of a member.
		in accordance with section 605.0203 (1) (b). Florida Statutes.
		ormation submitted in a document to the Department of State
	constitutes a third degree fe	lony as provided for in s.817.155, F.S.
	ED AMOROOA ALAZA	DADY)
	FRANCISCO ALVA	vped or printed name of signee
	1	yped of printed hattle 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 Status (Optional)