

To:

Page: 2 of 4

2024-03-18 20:55:29 GMT

1205328

From: Yanet Avila

3/18/24, 4:53 PM

L24 000125768

Florida Department of State
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.

((H24000103495 3)))



H240001034953ABC

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 : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)328-4774

****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.
MIAMI FIRE SERVICES LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I- Name

MIAMI FIRE SERVICES LLC

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address

**11252 SW 34 LN
MIAMI, FL 33165**

Mailing Address

**11252 SW 34 LN
MIAMI FL, 33165**

ARTICLES III-

Other provisions if any

ANY PURPOSE

ARTICLES IV- Register Agent, Register Office & Register Agent's Signature:)

(The Liability Company cannot serve as its own Register 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:

GERMAN GONZALEZ

11252 SW 34 LN

MIAMI, FL 33165

Having been named as register 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 register 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 register agent as provided for in Chapter 605 FS



Registered Agent's Signature (REQUIRED)

ARTICLES V- Manager {s} or Managing Member [s] of each Manager or Managing Member is as follows:

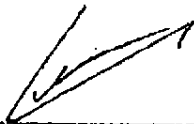
Title:

**GERMAN GONZALEZ
11252 SW 34 LN
MIAMI, FL 33165**

AMBR

ARTICLE VI: effective date, if other than the date filing 03/18/2024 (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 filing)

REQUIRED SIGNATURE:



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 third degree felony as provided for in s. 817.155, F.S.

GERMAN GONZALEZ