

# L24000181291

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.

((H24000143624 3)))



H240001436243ABC-

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 : CORPOLICENSE, INC  
Account Number : I20050000118  
Phone : (305)774-9606  
Fax Number : (305)774-9660

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

Email Address: Alemmontes@yahoo.es

FLORIDA LIMITED LIABILITY CO.  
PAFO JEWELRY, LLC

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

FILED  
2024 APR 19 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H24000 143624

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY  
OF  
PAFO JEWELRY, LLC**

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:

**PAFO JEWELRY, LLC**

**ARTICLE II - ADDRESS:**

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

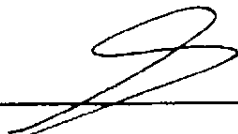
**PRINCIPAL ADDRESS: 777 NW 72<sup>nd</sup> Ave, Suite 1068  
Miami, Florida 33126**

FILED  
2024 APR 19 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The Registered Agent designated is: ALEJANDRO MONTES

**777 NW 72<sup>nd</sup> Ave, Suite 1068  
Miami, Florida 33126**

  
\_\_\_\_\_

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.

H24000 143624

H24000 143624

**ARTICLE IV - Management/Member(s):**

The name and address of each Manager or Managing Member is as follows:

**TITLE:                      NAME AND ADDRESS**

**MGR                      ALEJANDRO MONTES**  
**777 NW 72<sup>nd</sup> Ave, Suite 1068**  
**Miami, FL 33126**

**MGR                      PEDRO A. FIGUEREDO-OSORIO**  
**777 NW 72<sup>nd</sup> Ave, Suite 1068**  
**Miami, FL 33126**

  
\_\_\_\_\_  
**Alejandro Montes**  
**Manager**

**04/19/2024**

(In accordance with section 605.0201, Florida Statutes,  
The execution of this document constitutes an affirmation under  
The penalties of perjury that the facts stated herein are true)

H24000 143624