

# Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

**L 2400211991**

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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : HACHE FINANCIAL SOLUTIONS LLC  
Account Number : I20220000117  
Phone : (954)618-1001  
Fax Number : (954)252-4572

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

Email Address: \_\_\_\_\_

RECEIVED  
2024 MAY 10 AM 11:17  
DIVISION OF CORPORATIONS  
DIVISION OF COMMERCIAL  
REGISTRATION SERVICES

## FLORIDA LIMITED LIABILITY CO. GISELLE GUTIERREZ PLLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: GISGLER COTTAGE, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and bylaws are submitted for filing.  
Please return all correspondence concerning this matter to the following:

ALEXANDER HACHE JR.  
Name of Person

HACHE FINANCIAL SOLUTIONS, LLC  
Firm/Company

12515 ORANGE DRIVE, SUITE 510  
Address

DAVIE, FL 33330  
City/State and Zip Code

INFO@HACHEFINANCIAL.COM  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEXANDER HACHE JR. 954 615-1001  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$150.00 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)

Mailing Address:  
New Filing Section  
Division of Corporations  
P.O. Box 892  
Tallahassee, FL 32304

Street Address:  
New Filing Section, Division  
of Corporations  
2415 N. Monroe Street, Suite 510  
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is

GISELLE GUTIERREZ PLLC

(Must contain the words "Limited Liability Company," "LLC," or "LLC,")

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

13061 SW 107TH ST  
MIAMI, FL 33186

13061 SW 107TH ST  
MIAMI, FL 33186

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:

GISELLE GUTIERREZ

Name

13061 SW 107TH ST

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

MIAMI, FL 33186

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.

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:

Title:
MEMBER - Authorized Member
MEMBER - Manager
MEMBER

Name and Address

GISELE GUTIERREZ
1306 SW 107TH ST
MIAMI FL 33186

(Use attachment if necessary)

ARTICLE V Effective date, if other than the date of filing (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

PROFESSIONAL LIMITED LIABILITY COMPANY TO PROVIDE LICENSED LEGAL SERVICES

REQUIRED SIGNATURE

[Handwritten signature]

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 606.0203 (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(1)(b).

GISELE GUTIERREZ
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)
\$15.00 Certificate of Status (Optional)

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