Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 Phone : (954)384-8565

Fax Number : (954)385-5175

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

Email Address: Support@eflatinaccounting. Com

ON MAY 28 PM 4: 37

FLORIDA LIMITED LIABILITY CO. UNITYFOUR GROUP LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

COVER LETTER

TO:	New Filing Ser Division of Co				
SUBJEC	CT: UNITYFO	OUR GROUP LLC			
		Name of	Limited Liabi	lity Company	
The encl	osed Articles of	Organization and fee(s) are submitted	I for filing,	
Please re	tum all corresp	ondence concerning this	matter to the	following:	
	DIEGO FIG	UEROA			
			Name of	Person	
	E & F LATI	N GROUP LLC			
			Firm/Co	отралу	
	1820 N COI	RPORATE LAKES BL	VD SUITE 10	ý	
	·		Addi	ress	
	WESTON F	TL 33326			
	DIEGO@EI	FLATINACCOUNTING	City/State ar	nd Zip Code	
		E-mail address: (to be u	_	annual report notificat	ion)
For furthe	r information co	oncerning this matter, ple	case call:		
	DIEGO FIG	UEROA	, 954	384 8565	
	Nan	ne of Person	Arca Code	Daytime Telephon	e Number
Enclosed	l is a check for t	he following amount:			
	00 Filing Fee	■\$130.00 Filing Fee Certificate of Status	Certifi	5.00 Filing Fee & led Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address Tiling Section		Street Address New Filing Section D	ivision

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is.					
UNITYFOUR GROU					_	
(Must conta	in the words "Limited Lie	ability Company, "L.I	J.C.," or "LLC.")	•		
ARTICLE II - Address: The mailing address and street ad	dress of the principal offi	ice of the Limited Lial	bility Company is	S :		
<u>Principa</u>	l Office Address:		Malling A	Address:		
2665 EXECUTIVE PA WESTON, FL 33331	ARK DRIVE, STE 2		ECUTIVE PAR N, FL 33331	K DRIVE, STE 2	2024 MA	
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	annot serve as its own R	egistered Agent. You		n individual or.	7 28	
The name and the Florida street a	ddress of the registered a	gent are:		SEEL! LARIDA	圣	Ö
	E & F LATIN GROUP	LLC		<u></u>	89	
	1	Name			15	•
	1820 N CORPORATE Florida street address (-		
	WESTON	FLORIDA	33326	_		
	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)

Title: "AMBR" - Authorized N "MGR" - Manager	Name and Address:
AMBR	JORGE E. VELEZ 2665 EXECUTIVE PARK DRIVE. STF. 2 WESTON, FL 33331
MBR	NATALIA ROBLEDO 2665 EXECUTIVE PARK DRIVE, STE 2 WESTON, FL 33331
·*·	
	than the date of filing: (OPTIONAL)
LE V: Effective date, if oth feetive date is listed, the dof filing.) If the date inserted in this buttent's effective date on the LE VI: Other provisions, if	than the date of filing:
LE V: Effective date, if oth feetive date is listed, the dof filing.) If the date inserted in this burnent's effective date on the LE VI: Other provisions, if	than the date of filing:
LE V: Effective date, if oth feetive date is listed, the dof filing.) If the date inserted in this burnent's effective date on the LE VI: Other provisions, if	than the date of filing:
EV: Effective date, if oth feetive date is listed, the doof filing.) If the date inserted in this buttent's effective date on the LEVI: Other provisions, if Signature	than the date of filing:
LE V: Effective date, if oth fective date is listed, the dof filing.) If the date inserted in this burnent's effective date on the LE VI: Other provisions, if Signature Signature Signature Signature Signature I am awa	than the date of filing: te must be specific and cannot be more than five business days prior to or 90 deck does not meet the applicable statutory filing requirements, this date will not be Department of State's records. The second of a member or an authorized representative of a member of a