

**Florida Department of State**  
**Division of Corporations**  
**Business Filings - Cover Sheet**

**L24000256135**

**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.**

((H24000198179 3)))



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**Doing so will generate another cover sheet.**

To:

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

From:

Account Name : R&P ACCOUNTING AND TAXES INC  
 Account Number : I20170000090  
 Phone : (305)358-1310  
 Fax Number : (305)503-6701

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

Email Address: arod8723@gmail.com

**FLORIDA LIMITED LIABILITY CO.**  
**EPIC REALTY INVESTMENTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

**RECEIVED**  
**2024 JUN -7 AM 10:43**  
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**2024 JUN -7 PM 3:09**



June 6, 2024

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

R&P ACCOUNTING AND TAX INC

SUBJECT: EPIC REALTY INVESTMENTS LLC  
REF: W24000085091

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch  
Operations Manager A

FAX Aud. #: B24000198179  
Letter Number: 024A00012245

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2024 JUN -7 PM 3:39

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

***ARTICLE I***

*The name of the Limited Liability Company:*

***EPIC REALTY VENTURES LLC***

*(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C..")*

***ARTICLE II***

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

***Principal and Mailing Address***

***3301 N UNIVERSITY DR  
CORAL SPRINGS, FL 33065***

### 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:*

#### **R&P ACCOUNTING & TAXES INC**

*Name*

**150 SE 2<sup>ND</sup> AVE STE 404**

*Florida Street address (P.O. Box **NOT** acceptable)*

**MIAMI, FL 33131**

*FL City, State, and 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*

X-----A-----

**Registered Agent's Signature (REQUIRED)**

## ARTICLE IV

**MGR=Manager(s) or AMBR= AUTHORIZED Member(s):**

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

**AMBR**

**ANDRES FELIPE MENDEZ  
3301 N UNIVERSITY DR  
CORAL SPRINGS, FL 33065**

**50%**

**AMBR**

**MANUEL ALEJANDRO RESTREPO CARDONA  
3301 N UNIVERSITY DR  
CORAL SPRINGS, FL 33065**

**50%**

## 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.)***

**JUNE 3, 2024**

**REQUIRED: SIGNATURE**

**X**

***Signature of a member or an authorized representative of a member.***

**ANDRES FELIPE MENDEZ**

***(In accordance with section 605.0203(1) (b), Florida Statutes, the execution of this document  
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)***

***ARTICLE VI***

*The Florida Limited Liability Company will engage in any activity or business permitted under the laws of the State of Florida and the United States of America.*

***THE MAIN OBJECTIVE OF THE COMPANY IS:***

**REAL ESTATE**