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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Fax Number : (305)328-4774

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Email Address:

## FLORIDA LIMITED LIABILITY CO. ALMESA HOLDINGS LLC

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:				
ALMESA Holdings, L					
(Must contai	n the words "	Limited Liability Cor	npany, "L.L.C.," or '	'LLC.")	
ARTICLE II - Address: The mailing address and street add	Iress of the pi	incipal office of the l	imited Liability Cor	npany is:	
Principal Office Address:			M	Mailing Address:	
6771 SW 5th Terrace		•	6771 SW 5th Terrace		
Miami, FL 33144			Miami, FL 33144		
ARTICLE III - Registered Ager (The Limited Liability Company on other business entity with an act.) The name and the Florida street of	annot scrve a tive Florida r	s its own Registered a egistration.)			
	Georgina Blanco, PA				
		Name			
	10261 Sunse	et Dr., Suite C-101			
	Florida stre	et address (P.O. Box)	YOT acceptable)		
	Miami	PL	331	77	
				<u> </u>	

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)

2024 JUN 11 PH 4: 41

ARTICLE IV-

Title:	Name and Address:
"AMBR" = Authorized Memb	жег
"M(TR" = Manager	
MGR	Alan Castro Granda
	6771 SW 5th Terrace Miani, FL 33144
	manu. 10 33144
MGR	Melisau Flierra Garcia
MOR	6771 SW 5th Terrace
	Miemi, FL 33144
(Use attachment if necessary)	
CLE V: Effective date, if other th	no the date of filing:
We it is done to the said the date of	must be specific and cannot be more than five business days prior to or 90 days after
effective date is usted, the date is	
ite of filing.)	
ite of filing.)  If the date inserted in this block	does not meet the applicable statutory filing requirements, this date will not be listed as
ite of filing.)	does not meet the applicable statutory filing requirements, this date will not be listed as epartment of State's records.
ate of filing.)  If the date inserted in this block ocument's effective date on the De	epartment of State's records.
te of filing.)  If the date inserted in this block bounder's effective date on the DeCLE VI: Other provisions, if any.	epartment of State's records.
te of filing.)  If the date inserted in this block ocument's effective date on the Dick CLR VI: Other provisions, if any.	epartment of State's records.

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