Florida Department of State

Division of Corporations and botton of all pa

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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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Email	Address:				
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FLORIDA LIMITED LIABILITY CO. LAZARO DEMOLICION LLC

Certificate of Status	1
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Corporate Filing Menu

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ARTICLE 1 - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Lazaro Demolicion (CC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
6453 Nw 102nd Path # 105, Doral F1 33178	
	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (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.)	
4040my Palermo Reveroc Morales 6453 ru 102rd PATH H 105, DAG, FL 3213	3.8
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	
YOHANNY PALECMA REVEREL MAYALES	SECR 2021 Ju
(LIMPK)	JN I A
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EIN: 99-3574623

Required Signatures:

3052201440

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

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. 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.

Typed or printed name of signee

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)