(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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June 17, 2024

ALFREDO BRIZUELA 7548 SW 191 STREET CUTLER BAY, FL 33157 US

SUBJECT: ALFREDO BRIZUELA Ref. Number: W24000078558

We have received your document for and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6000.

Letter Number: 724A00013168

Summer Chatham Supervisor New Filings Section

2024 JUL -9 PH 4: 59

COVER LETTER

	w Filing Sec vision of Co					` <u>`</u>
SUBJECT:	Brizuela E					
SUBJECT.		Nan	ne of Limited	Liabilit	Company	
The enclose	d Articles of	Organization and	fee(s) are sub	mitted f	or filing.	
Please return	n all correspo	ondence concernin	g this matter t	to the fo	llowing:	
	Alfredo Briz	uela				
-			Na	ame of P	erson	
	Brizuela Eng	gineering				` <u>.</u>
-	<u> </u>	-	Fi	rm/Cor	pany	
	7548 SW 19	1 Street				
-		-		Addres	S	- .
1	Cutler Bay, I	Florida 33157				
- al	lbrizualaan <i>a</i>	@gmail.com	City/S	tate and	Zip Code	
<u>-</u>			be used for f	uture an	nual report notificati	on)
For further in		ncerning this matte			•	,
	Alfredo	6	305	` }	582-4648	**
_	Nam	e of Person	Area C	ode	Daytime Telephone	e Number
Enclosed is	a check for t	he following amou	int:			
□\$125.00 I		□\$130.00 Filin Certificate of S	g Fee & tatus	Certified	00 Filing Fee & I Copy copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address			treet Address	
		iling Section on of Corporations	i		ew Filing Section Di he Centre of Tallaha	
	P.O. B	ox 6327		2	415 N. Monroe Stree	et, Suite 810
	Tallah	assee, FL 32314		T	allahassee, FL 3230:	3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Brizuela Engineering, LLC	
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
	e of the Limited Liability Company is:
E II - Address: ng address and street address of the principal office Principal Office Address:	e of the Limited Liability Company is: Mailing Address
ng address and street address of the principal office Principal Office Address:	Mailing Address
ng address and street address of the principal office	

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:

	Name	
7548 SW 191 Stree	t	
Florida street addre	ess (P.O. Box <u>NOT</u> acc	reptable)
Cutler Bay	Florida	33157

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)



ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Alfredo Brizuela MGR 7548 SW 191 Street Cutler Bay, Florida 33157 (Use attachment if necessary) _. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: May 10. 2024 (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.

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.

ALTREDO BRIZUELA

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

REOUIRED SIGNATURE: