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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : YOUR DREAM SERVICES CORP.
Account Number : 12020000137
Phone : (786)660-0108
Fax Number : (786)364-1047

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

Email Address: INFO@YOURDREAMMS.COM

RECEIVED

2024 AUG 23 AM 9:04

DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

**FLORIDA LIMITED LIABILITY CO.
LOS CILAMOS PAINTING SERVICES LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

2024 AUG 23 PM 4:25

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LOS CHAMOS PAINTING SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEXIS CARRILLO

Name of Person

Alexis Carrillo

Firm/Company

378 48TH AVE N

Address

ST PETERSBURG, FL 33703

City/State and Zip Code

loschamos933@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexis Carrillo	727	454-8599
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$125.00 Filing Fee	<input checked="" type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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Mailing Address

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

Street Address

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LOS CHAMOS PAINTING SERVICES LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

378 48TH AVE N

ST PETERSBURG, FL 33703

378 48TH AVE N

ST PETERSBURG, FL 33703

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:

YOUR DREAM MULTISERVICES CORP

Not

9554 NW 41ST ST

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

DORAL

FL

33178

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 ~~his~~ 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~~ **Chapter** 605, FS.*

Isamar Torres

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

ALEXIS CARRILLO

378 48TH AVE NUNT 124

ST PETERSBURG, FL 33703

MGR

EDIMAR PEDROZA CARRILLO

1305 85TH TERRACE N, APT C

ST PETERSBURG, FL 33702

(Use attachment if necessary)

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.)

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.

The company offers expert painting services for residential, commercial, and industrial spaces, focusing on high-quality finishes, color consultation, and custom decorative techniques. We also provide surface maintenance and repairs ensuring results that meet our clients' aesthetic and functional needs.

REQUIRED SIGNATURE:

Alexis Carrillo

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.

ALEXIS CARRILLO

Typed or printed name of signer _____

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 (Certified Copy (Optional))

S 5.00 Certificate of Status (Optional)

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