

Florida Department of State

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

From:
Account Name : CG TAX, INC.
Account Number : I19990000017
Phone : (305)485-9300
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
ALZATE DIAZ, LLC.

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

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STATE OF FLORIDA
TALLAHASSEE, FL

Corporation will start operating On January 1st 2025.

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Corporate Filing Menu

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FL

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

ALZATE DIAZ, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

ALZATE DIAZ, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**6445 NE 7TH AVE
MIAMI, FL. 33138**

The mailing address shall be:

**6445 NE 7TH AVE
MIAMI, FL. 33138**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

SARA DIAZ

6445 NE 7TH AVE
Florida Street address (P.O.BOX NOT acceptable)
MIAMI, FL. 33138
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.

Sara Diaz Poma
REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**SARA DIAZ
6445 NE 7TH AVE
MIAMI, FL. 33138**

AMBR

**SEBASTIAN ALZATE
6445 NE 7TH AVE
MIAMI, FL. 33138**

MGR

Sara Diaz Poma
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.)

SARA DIAZ

ARTICLE V

THIS CORPORATION WILL START OPERATING ON JANUARY 1ST, 2025