

10/15/24, 2:29 PM

Division of Corporations

L24000439550

Florida Department of State

Division of Corporations

Electronic Filings

10.17.24

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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

From:
Account Name : DOSSANTOS AND MACHADO, LLC
Account Number : I20140000089
Phone : (754)301-2128
Fax Number : (954)252-4650

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@GFSTAXACCT.COM

SECRETARY OF STATE
TALLAHASSEE, FL

2024 OCT 16 PM 1:23

RECEIVED

FLORIDA LIMITED LIABILITY CO.
SHK HOLDING LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

24 OCT 16 PM 7:24

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To:

Page: 3 of 6
850-617-6381

2024-10-16 16:43:13 GMT
10/16/2024 11:38:43 AM PAGE

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1/001 Fax Server

From: Juliana dos Santos



October 16, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DOSSANTOS AND MACHADO, LLC

SUBJECT: SHK HOLDING LLC
REF: W24000141559

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

If you have any further questions concerning your document, please call (850) 245-6052.

Crystal S Hightower
Regulatory Specialist II
New Filings Section

FAX Aud. #: H24000344995
Letter Number: 224A00022843

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DIVISION OF CORPORATIONS
24 OCT 16 PM 7:24

(((H24000344995 3)))

COVER LETTER**TO: New Filing Section
Division of Corporations****SUBJECT: SHK HOLDING 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:

GILVAM F DOS SANTOS

Name of Person

GFS TAX & ACCOUNTING SERVICES

Firm/Company

11764 W SAMPLE RD - STE 102

Address

CORAL SPRINGS, FL 33065

City/State and Zip Code

INFO@GFSTAXACCT.COM

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

For further information concerning this matter, please call:

GILVAM F DOS SANTOS

754

268 6771

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee☐ \$130.00 Filing Fee &
Certificate of Status☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)**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

(((H24000344995 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SHK HOLDING 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:11764 W SAMPLE RD - STE 102CORAL SPRINGS, FL 33065**Mailing Address:**11764 W SAMPLE RD - STE 102CORAL SPRINGS, FL 33065**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:

GILVAM F DOS SANTOS

Name

11764 W SAMPLE RD - STE 102Florida street address (P.O. Box **NOT** acceptable)CORAL SPRINGSFL33065

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 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:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

JOSE ANDERSON SALES DA SILVA

Praca Cap. Alberto Mendes Junior, 71

Guarulhos - SP, 07012-031, Brazil

(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.

CELL PHONE RESALE

REQUIRED SIGNATURE:

Jose Anderson Sales da Silva
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.

JOSE ANDERSON SALES DA SILVA

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)

FILED
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DIVISION OF CORPORATIONS
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