

(((1124000366843 3)))



H24000366843359C3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

		rporations	Ξ'	<b>27</b>	(J)
		: (850)617-6381		! - ,	TALI
From:				÷	27-2
	Account Name		FILING	SERVICE INC.	<del></del>
	Account Number			· .	SO T
	Phone	: (305)444-4994	- 1	· · · · · · · · · · · · · · · · · · ·	က္ရင္
,	Fax Number	: (305)328-4774			'nο
					<u></u>
**Enter ti	he email addres	s for this business	entity	to be used for	future
annu	al report maili	ings. Enter only one	email a	iddress please.	**
	•	,		•	

## FLORIDA LIMITED LIABILITY CO. FERNANDEZ TILES AND REMODELING LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ii

44

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	• • • • • • • • • • • • • • • • • • • •
Fernancez Tiles and Remodeling LLC	
(Must contain the words "Limited Linb	lity 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:	( c Mulling Address:
17201 SW 149 Ct.	17201 SW 149 Ct.
Miami, FL 33187	Miami, FL 33187

(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:

Georgina Bianco, Es	Name	
10261 Sunset Dr. Su	ite C-101	•
Florida street addres		(ccoptable)
Miami	FL	! 33173
	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 the position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

i) h.

(CONTINUED)

2024 NOV -4 PN 3: 03

		<del>.</del> .	بلم		
	The name and address of each person	authorized to mauage and control t	he Limited Liabi	lity Company:	
	Title:	Name and Address:			
	"AMBR" - Authorized Member	:			
[[/ a :	"MGR" = Manager		·		
the car	MGR	Iran Fernandez Caballero 17201 SW 149 Ct.	· · · · · · · · · · · · · · · · · · ·	·	
Note:		Miemi, FL 33187	T.A		
th			,		
ATC L	****		, 		
			<del></del>		
		F*	1.1		
				9741104	
				· <del>=</del>	
	(Use attachment if necessary)		•		-
327 Te 1	ument's effective date on the Departmen	t meet the applicable statutory filir nt of State's records.	að!	三型 6	<u>ب</u>
1 47 TE C	ument's effective date on the Department's effective date on the Department.	nt of State's records.	a3)	PATE	
·5 27 % 1	ument's effective date on the Departmen	nt of State's records.	40]	FAIR	
-> 27 Ta 1	REQUIRED SIGNATURE  Signature of a to This document is executed a may be a	member or an authorized represented in accordance with section 60 lise information submitted in a docu	entactive of a men 05.0203 (1) (b), to ment to the Dep	mber.	
-> 27 Ta 1	REQUIRED SIGNATURE  This document is exect I am aware that any facconstitutes a third degree in the Department of the constitutes a third degree in the Department of the Department is exect I am aware that any facconstitutes a third degree in the Department is exect I am aware that any facconstitutes a third degree in the Department of the Department o	member or an authorized represented in a good information submitted in a good ree felony as provided for in s.817.	entactive of a men 05.0203 (1) (b), to iment to the Dep 155, F.S.	mber.	
95 27 Ta 1	REQUIRED SIGNATURE  Signature of a to This document is executed a may be a	member or an authorized represented in accordance with section 60 lise information submitted in a docurrer felony as provided for in s.817.	entactive of a men 05.0203 (1) (b), to iment to the Dep 155, F.S.	mber.	
95 27 Ta 1	REQUIRED SIGNATURE  This document is exect I am aware that any degree of a grant transfer at the constitutes a third degree of the constitutes at	member or an authorized represented in a good size information submitted in a doctoree felony as provided for in s.817.  Caballero  Typed or printed name of sign	entative of a men 15.0203 (1) (b), turnent to the Dep 155, F.S.	mber. florida Statutes. artment of State	
11 St. 11 Co.	REQUIRED SIGNATURE  This document is exect I am aware that any facconstitutes a third degree in the Department of the constitutes a third degree in the Department of the Department is exect I am aware that any facconstitutes a third degree in the Department is exect I am aware that any facconstitutes a third degree in the Department of the Department o	member or an authorized represented in accordance with section of lise information submitted in a doctree felony as provided for in s.817.  Caballero  Typed or printed name of sign filing Fees:  Organization and Designation of	entative of a men 15.0203 (1) (b), turnent to the Dep 155, F.S.	mber. florida Statutes. artment of State	
ARTIC	REQUIRED SIGNATURE  This document is easy fa constitutes a third deg  Iran Fernandez  \$125.00 Filling Fee for Articles of C	member or an authorized represented in accordance with section of lise information submitted in a doctree felony as provided for in s.817.  Caballero Typed or printed name of sign Filing Fees: Organization and Designation of	entative of a men 15.0203 (1) (b), turnent to the Dep 155, F.S.	mber. florida Statutes. artment of State	
95 27 Ta 1	REQUIRED SIGNATURE.  This document is exect I am aware that any faconstitutes a third deg  Iran Fernandez  \$125.00 Filling Fee for Articles of C \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	member or an authorized represented in accordance with section of lise information submitted in a doctree felony as provided for in s.817.  Caballero Typed or printed name of sign Filing Fees: Organization and Designation of	entative of a men 15.0203 (1) (b), turnent to the Dep 155, F.S.	mber. florida Statutes. artment of State	
erice	REQUIRED SIGNATURE.  This document is exect I am aware that any faconstitutes a third deg  Iran Fernandez  \$125.00 Filling Fee for Articles of C \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	member or an authorized represented in a coordance with section for lise information submitted in a doctoree felony as provided for in s.817.  Caballero Typed or printed name of sign Filing Fees: Organization and Designation of onal)	entative of a menos. O203 (1) (b), to the Dep. 155, F.S.	mber. florida Statutes. artment of State	