L24000470015

(Pag	uestor's Name)	
(гчеч	desions marrie)	
(Add	ress)	
(Add	ress)	
(City,	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
\ -	- · · · · · · · · · · · · · · · · · · ·	,
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



300438487013

11/04/24--01018--021 **125.00

2024 NOV - 4 AM 7: 51

COVER LETTER

	iew Filing Sec Division of Co				
SUBJECT		BAL ASSETS LLO	7		
SOBJEC	'· 	Nar	ne of Limited L	iability Company	
The enclos	sed Articles of	Organization and	fee(s) are subm	itted for filing.	
Please retu	arn all corresp	ondence concernin	g this matter to	the following:	
	LUIS SALA	ZAR			
	*****		Nan	ne of Person	
	SALAZAR	CAPITAL GROU	P LLC		
			Fire	n/Company	
	1711 AMA2	ZING WAY STE	217		
				Address	
	OCOEE, FL	. 34761			
	info@solozoe	capitalgroup.com	City/Sta	te and Zip Code	
			be used for fut	ure annual report notifica	tion)
For further	information co	oncerning this matt	er, please call:	·	
	LUIS SALA	ZAR	407 at (5088088	
	Nan	ne of Person	Area Co	de Daytime Telepho	ne Number
Enclosed i	is a check for t	the following amou	mt:		
■\$125.0	0 Filing Fee	□\$130.00 Filin Certificate of S	tatus C	\$155.00 Filing Fee & entified Copy itional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	· · · · · · · · · · · · · · · · · · ·	ng Address		Street Address	x
		Filing Section on of Corporation:	:	New Filing Section I The Centre of Tallal	
		30x 6327	•	2415 N. Monroe Str	
	Tallah	assee, FL 32314		Tallahassee, FL 323	03

1/4

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

The name of the Limited Liability Compa	any is:	
AM GLOBAL ASSETS LLC	· •	

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	Mailing Address:
1711 AMAZING WAY	1711 AMAZING WAY
STE 217	STE 217
OCOEE, FL 34761	OCOEE, FL 34761

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:

LUIS SALAZAR		
	Name	
1711 AMAZING W	/AY STE 217	
Florida street addre	ess (P.O. Box <u>NOT</u> ac	eceptable)
OCOEE	FL	34761
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:

"AMBR" = Authorize	
	ted Member
"MGR" = Manager	
AMBR	JIMY AVENDANO-PAREDES
	1711 AMAZING WAY STE 217
	OCOEE. FL 34761
AMBR	LUZ PAREDES-DUARTE
	1711 AMAZING WAY STE 217
	OCOEE, FL 34761
AMBR	ABRAHAN AVENDANO-VARGAS
1111111	1711 AMAZING WAY STE 217
	OCOEE, FL 34761
AMDD	MIDIA AMENDANO DA DEDEC
AMBR	NIDIA AVENDANO-PAREDES 1711 AMAZING WAY STE 217
	OCOEE, FL 34761
rective date is listed, t	•
e of filing.) If the date inserted in the ument's effective date	this block does not meet the applicable statutory filing requirements, this date will not be list on the Department of State's records.
of filing.) If the date inserted in the ument's effective date	on the Department of State's records.
of filing.) If the date inserted in the ument's effective date	on the Department of State's records.
e of filing.) If the date inserted in the ument's effective date	e on the Department of State's records. ns, if any.
ument's effective date	e on the Department of State's records. ns, if any.
of filing.) If the date inserted in the ument's effective date LE VI: Other provision REOUIRED SIGNA This	ATURE: Signature of a member or an authorized representative of a member. document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
of filing.) If the date inserted in the ument's effective date LE VI: Other provision REOUIRED SIGNA This I am	ATURE: Signature of a member or an authorized representative of a member.
of filing.) If the date inserted in the ument's effective date LE VI: Other provision REOUIRED SIGNA This I am	ATURE: Signature of a member or an authorized representative of a member. s document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. a ware that any false information submitted in a document to the Department of State

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)

ARTICLE IV-

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

Title:	Name and Address:		
"AMBR" = Authorize	ed Member		
"MGR" = Manager			
<u>AMBR</u>	HARBEY AVENDANO-PAREDES		_
	1711 AMAZING WAY STE 217 OCOEE, FL 34761		_
	OCORE, PL 34701		-
AMBR	YOLEIDY AVENDANO-PAREDES		
	1711 AMAZING WAY STE 217		_
	OCOEE. FL 34761	-	_
AMBR	ASBEIDY AVENDANO-PAREDES		
AMDK	1711 AMAZING WAY STE 217		_
	OCOEE. FL 34761		_
AMBR	FABIO AVENDANO-PAREDES		_
	1711 AMAZING WAY STE 217 OCOEE, FL 34761		_
			_
/1 (= 1	and a second		
- I I ICO Offorbusiant it ma			
fective date is listed, the of filing.)	f other than the date of tiling: 10/24/2024. he date must be specific and cannot be more than five business	days prior to or 90	•
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records.	days prior to or 90	•
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the three date of the date inserted in the three date of the	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records.	days prior to or 90	•
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the three date of the date inserted in the three date of the	fother than the date of filing: 10/24/2024 the date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any.	days prior to or 90	•
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the ument's effective date of LE VI: Other provision:	fother than the date of filing: 10/24/2024 the date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any.	days prior to or 90	•
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the ament's effective date of the LE VI: Other provisions REQUIRED SIGNA This of the content of	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (b)	member.	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the forment's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a	fother than the date of filing: 10/24/2024 the date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (between that any false information submitted in a document to the I	member.	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the forment's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (b)	member. Department of State	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the forment's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (haware that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S.	member. Department of State	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the forment's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (haware that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S. JIMY AVENDANO-PAREDES	member. Department of State	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the forment's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (haware that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S.	member. Department of State	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the forment's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s. if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (the aware that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S. JIMY AVENDANO-PAREDES Typed or printed name of signee	member. Department of State	ot be li
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the ument's effective date of the LE VI: Other provision: REQUIRED SIGNA This of I am a construction.	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (because that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S. JIMY AVENDANO-PAREDES Typed or printed name of signee Filing Fees:	member. Department of State ALLARSSE	2024 NOV - L
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the ument's effective date of the LE VI: Other provisions REQUIRED SIGNA This is a construction of the constructio	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (because that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S. JIMY AVENDANO-PAREDES Typed or printed name of signee Filing Fees: for Articles of Organization and Designation of Registered A	member. b), Florida Statutes. Department of State	2024 NOV - L
LE V: Effective date, if fective date is listed, the of filing.) If the date inserted in the ument's effective date of the LE VI: Other provisions REQUIRED SIGNA This of I am a constitution of the consti	fother than the date of filing: 10/24/2024 he date must be specific and cannot be more than five business his block does not meet the applicable statutory filing requirement on the Department of State's records. s, if any. Signature of a member or an authorized representative of a document is executed in accordance with section 605.0203 (1) (because that any false information submitted in a document to the Litutes a third degree felony as provided for in s.817.155, F.S. JIMY AVENDANO-PAREDES Typed or printed name of signee Filing Fees: for Articles of Organization and Designation of Registered A	member. b), Florida Statutes. Department of State ALLARASSEE, gent	ot be li

95 **86**