# **Division of Corporations** Electronic Filing Cover Sheet

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(((H24000411533 3)))



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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CS TAX SOLUTIONS INC

Account Number : I20220000082 Phone : (305)235-6355 Fax Number : (786)513-3784

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

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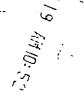
#### FLORIDA LIMITED LIABILITY CO.

EL HUARIKE DELYSOCIO, LLC

Certificate of Status	1
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Page Count	03
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Help





December 18, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

CS TAX SOLUTIONS INC

SUBJECT: SEISE, LLC REF: W24000165850

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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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New Filing Section

Rickey L Richardson FAX Aud. #: H24000411533 Regulatory Specialist II Letter Number: 024A00027518

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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(7710	st contain the words "Limited Liah	uniy Company, "1	.tC., or "Lt.C.")
RTICLE II - Address: ne mailing address and s	street address of the principal office	of the Limited Lia	ability Company is:
<u>P</u>	rincipal Office Address:		Mailing Address:
7371 NW 36T	H STREET	7371 NV	W 36TH STREET
			, FL 33166
e Limited Liability Co ther business entity w	ed Agent, Registered Office, & Rompany cannot serve as its own Registration.)  street address of the registered age	egistered Agent's	Signature:
RTICLE III - Register The Limited Liability Co nother business entity w	red Agent, Registered Office, & Rompany cannot serve as its own Registration.) street address of the registered age	egistered Agent's	Signature:
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ARTICLE III - Register The Limited Liability Co nother business entity w	red Agent, Registered Office, & Rompany cannot serve as its own Registration.)  street address of the registered age  RUBEN SOLER  No. 1371 NW 36TH STREET	egistered Agent's fistered Agent. You int are:	Signature: a must designate an individual o

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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## H24000411533 3

From: CS TAX SOLUTIONS, INC

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	RUBEN SOLER 2140 WEST FLAGLER STREET #104 MIAMI, FL 33135
(Use attachment if necessary)	
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- \$ 30,00 Certified Copy (Optional)
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