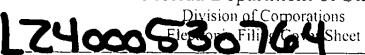
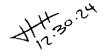
27/12/24, 4:38 p.m. H240004237083

Division of Corporations

Florida Department of State





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.

(((H24000423708 3)))



H24000423708348C/

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LATIN AMERICAN TAXPRO

Account Number : I20220000106 Phone : (407)318-0823 Fax Number : (561)467-5851

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. PLUS FINANCE SERVICES LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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Corporate Filing Menu

Help

Tallahassee, FL 32314

H240004237083

COVER LETTER

	ew Filing Section of Co					
CHD IEC'I	PLUS FIN	ANCE SERVICES LLC				
SUBJECT	·	Name of I	Limited Liabi	ity Company		
The enclos	sed Articles of	Organization and fee(s)	are submitted	for filing.		
Please retu	ırn all corresp	ondence concerning this	matter to the	following:		
	HENRY SE	GUNDO, VILLAMIZAI	R KRISTIN			
		-	Name of	Person		
	PLUS FINA	NCE SERVICES LLC				
		· · · · · · · · · · · · · · · · · · ·	Firm/Co	mpany		
	2949 SHAR	P RD				
			Addı	ess		
	KISSIMME	E FLORIDA 34744				
	PLUSFINAN	CESERVICESLLC@G	City/State ar MAIL.COM	d Zip Code		
-		E-mail address: (to be us	ed for future :	innual report notificati	ion)	
For further in	nformation co	ncerning this matter, plea	ase call:			
		VILLAMIZAR K.	352			
		ne of Person				
Enclosed is	s a check for t	he following amount:				
□\$125.00	Filing Fee	■\$130.00 Filing Fee Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	· 21
	New F Divisio	ig Address illing Section on of Corporations tox 6327		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree	ivision Issee	0EC 27

Tallahassee, Fl. 32303

H240004237083

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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. A 14	- 11		3.		me:

The name of the Limited Liability Company is:

PLUS FINANCE SERVICES 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:

Prin	cipal	Office	Address:

Mailing Address:

2949 SHARP RD KISSIMMEE FLORIDA 34744 2949 SHARP RD KISSIMMEE FLORIDA 34744

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:

HENRY SEGUNDO, VILLAMIZAR KRISTIN

Name

2949 SHARP RD

Florida street address (P.O. Box NOT acceptable)

KISSIMMEE

FLORIDA

3.17.1.1

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..

HSVillamizas.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

24 DEC 27 AM 6: 53

H240004237083

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	HENRY SEGUNDO, VILLAMIZAR KRISTIN	
<u></u>	2949 SHARP RD	- -
	KISSIMMEE FLORIDA 34744	-
MGR	MARILIN COROMOTO, DIAZ BLANCO	
<u> </u>	2949 SHARP RD KISSIMMEE FLORIDA 34744	_
	KISSIMMEE FLORIDA 34744	-
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