

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax credit number (shown below) on the e-mail to avoid all pages of the document.

(((H25000015249 3)))



H250000152493ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : USA INTERNATIONAL SERVICE

Account Number : I20240000151

Phone : (305)262-8255

Fax Number : (305)262-8233

****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.

ABAD'S MULTISERVICES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

2025 JAN 14 AM 10:47

FILED
SECRETARY OF STATE
2025 JAN 14 PM 3:11

Electronic Filing Menu

Corporate Filing Menu

Help

MS

H25000015249 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ABAD'S MULTISERVICES 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:Mailing Address:5600 Collins Avenue Apt 9U
Miami Beach, FL 331405600 Collins Avenue Apt 9U
Miami Beach, FL 33140**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:

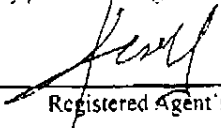
Leslie B. Abad Balarezo

Name

5600 Collins Avenue Apt 9UFlorida street address (P.O. Box **NOT** acceptable)

<u>Miami Beach</u>	<u>Florida</u>	<u>33140</u>
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)

 FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATE
 2025 JAN 14 PM 3:17

H25000015249 3

11250000 152493

ARTICLE IV-

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

Title:**Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

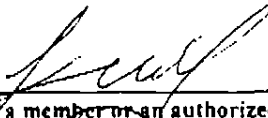
AMBRLeslie B. Abad Balarezo
5600 Collins Avenue Apt 90
Miami Beach, FL 33140______________________________

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01/13/2025 (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._____

_____**REQUIRED SIGNATURE:**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.Leslie B. Abad Balarezo

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)

11250000 152493