

L 990000007487

Charter Number Only

10-26-99 Hiram

Humberto Ocariz
Requestor's Name

2151 LeJeune Rd. #312
Address

Coral Gables, FL 33134
City State ZIP Phone

(305) 444-8288

VALIDATION ONLY

800003027598--8
-10/28/99--01029--008
****155.00 ****155.00

CORPORATION(S) NAME

ASACC GROUP, LLC

W99-24898

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input checked="" type="checkbox"/> Reinstatement | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait | <input type="checkbox"/> Mail |
| <input checked="" type="checkbox"/> Walk In | <input checked="" type="checkbox"/> Pick Up | |

RECEIVED
99 OCT 28 AM 9:50
DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Empire Toll Free: 1-800-432-3028

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY
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99 NOV -5 PM 1:38
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

11/5



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 28, 1999

EMPIRE

SUBJECT: ASACC GROUP, LLC
Ref. Number: W99000024898

We have received your document for ASACC GROUP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must remove the Affidavit of Membership and Contributions from the document, it is no longer accepted, be sure to leave the signature of the member.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 399A00051858

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 NOV -5 AM 10:12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ASACC Group, LLC

ARTICLE II - Address:

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

10505 N.W. 27th Street
Miami, FL 33172

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Ninety Nine Years

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Nelson Cabrera
10505 N.W. 27th Street
Miami, FL 33172

Vilma L. Cabrera
10505 N.W. 27th Street
Miami, FL 33172

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - Admission of Additional Members:

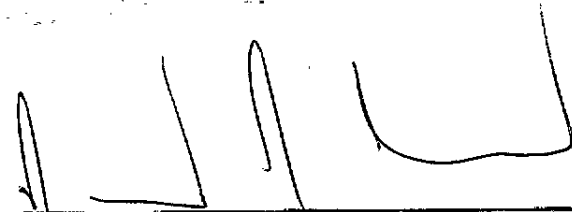
The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

New members shall be admitted to the Limited Liability Company pursuant to a vote of not less than 100% of the total existing ownership interests in the Limited Liability Company, which percentage shall be determined and measured by the percentage of ownership interest each member has in the Limited Liability Company shall ever have the power to terminate or grant membership to any person.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The remaining and/or surviving members shall be fully entitled to continue the business of the Limited Liability Company provided that 100% of the ownership interests then remaining shall agreed to do so in writing.

X 

Signature of a member or an authorized representative of a member.

Nelson Cabrera

Typed or printed name of signee

Filing Fee: \$240.00 for Articles and Affidavit.

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TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

ASACC Group, LLC

2. The name and the Florida street address of the registered agent are:

Nelson Cabrera

NAME

10505 N.W. 27th Street

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

Miami

FL 33172

CITY, STATE AND 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 do so 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.*

X

SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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CLERK OF STATE
TALLAHASSEE FLORIDA