

L24000345002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

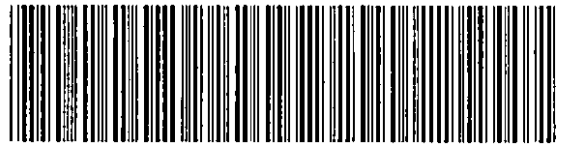
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500431047155

2024 AUG -8 PM 4:47

RECEIVED

SECRET
FALLAHASSEL, LUKAB

2024 AUG -8 PM 4:48

RECEIVED

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: \$ 130.-

AUTHORIZATION SIGNATURE: [Signature]

Premier Custom Wood, LLC

BUSINESS (Name)

Document #

Walk in

Pick up time _____

Mail out

Will wait

Photocopy

Certified Copies of Articles of Organization

Certificate of Status

NEW FILINGS

Profit

Not for Profit

Limited Liability

Domestication

CORP

L.L.P.

AMMENDMENTS

Amendment

Resignation of R.A. Officer/Director

Change of Registered Agent

Dissolution/Withdrawal

Merger

Conversion

OTHER FILINGS

Annual Report

Fictitious Name

APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

Foreign Filing

Limited Partnership

Reinstatement

Trademark

Other

EXAMINER'S INITIALS: _____

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: J20210000160: \$ 130.

AUTHORIZATION SIGNATURE: [Signature]

Premier Custom Wood LLC
BUSINESS (Name) Document #

Walk in Pick up time

Mail out Will wait

Photocopy

Certified Copies of Articles of Organization

Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- CORP
- LLLP

AMMENDMENTS

- Amendment
- Resignation of R.A. Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger
- Conversion

OTHER FILINGS

- Annual Report
- Fictitious Name
- APOSTIL () _____
Country

REGISTRATION/QUALIFICATIONS

- Foreign Filing
- Limited Partnership
- Reinstatement
- Trademark
- Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PREMIER CUSTOM WOOD, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALVARO ANDRES GARCIA TRILLOS
Name of Person
PREMIER CUSTOM WOOD, LLC
Firm/Company
1104 NW 7TH AVE APT 1
Address
FORT LAUDERDALE, FL 33311
City/State and Zip Code
ANDRUJOIS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

2009-01-08 10:47

110

For further information concerning this matter, please call:

ALVARO A GARCIA TRILLOS 786 586-4001
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PREMIER CUSTOM WOOD, 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:

1104 NW 7TH AVE
APT 1
FORT LAUDERDALE, FL 33311

1104 NW 7TH AVE
APT 1
FORT LAUDERDALE, FL 33311

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.)

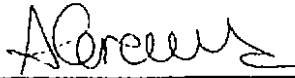
The name and the Florida street address of the registered agent are:

ALVARO ANDRES GARCIA TRILLOS
Name

1104 NW 7TH AVE APT 1
Florida street address (P.O. Box **NOT** acceptable)

FORT LAUDERDALE FL 33311
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:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

ALVARO Andres Garcia Trillos

1104 NW 7TH AVE

APT 1

FORT LAUDERDALE, FL 33311

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: AUGUST 8TH (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.

ALVARO ANDRES GARCIA TRILLOS

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)