

8/16/24, 10:43 AM

Division of Corporations

(H)
8.19.24

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

L24000356470

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.

(((H24000275140 3)))



H240002751403ABCZ

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 : TAX COUNSEL, PLLC
Account Number : I20210000011
Phone : (305)907-5540
Fax Number : (305)907-5437

RECEIVED
2024 AUG 16 PM 1:56
DIVISION OF CORPORATIONS
COMMERCIAL
SERVICES

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

Email Address: andrea@taxcns1.com

**FLORIDA LIMITED LIABILITY CO.
EL TORNO, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED
2024 AUG 16 PM 1:56
DIVISION OF CORPORATIONS
COMMERCIAL
SERVICES

(((H24000275140 3)))

ARTICLES OF ORGANIZATION
OF
EL TORNO, LLC

ARTICLE I – NAME

The name of the limited liability company is EL TORNO, LLC, ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:
4871 SW 173rd Avenue,
Miramar, FL 33029

Mailing Address:
999 Ponce de Leon Blvd., Ste. 720
Coral Gables, FL 33134

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Tax Counsel, PLLC
999 Ponce de Leon Blvd., Ste. 720
Coral Gables, FL 33134

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.

Andrea Aguilar
Andrea Aguilar (Aug 16, 2024 10:33 EDT)
Andrea Aguilar, Authorized Representative

ARTICLE IV - MANAGERS OR MEMBERS

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

(((H24000275140 3)))

((H24000275140 3)))

Title:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Name and Address:

Fernando Hurtado
4871 SW 173rd Avenue,
Miramar, FL 33029

REQUIRED SIGNATURE:

Fernando Hurtado P.

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.

Fernando Hurtado

Typed or printed name of signer

08/16/2024 02:57 AM
TO:18506176381 FROM:3059075437

((H24000275140 3)))