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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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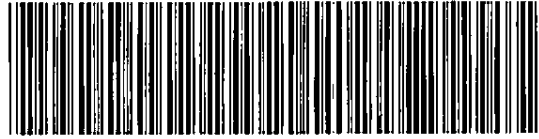
(Business Entity Name)

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(850) 656- 4724
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Tallahassee, FL 32312

Date: 01/21/2025

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Eric DW

Name:	Grupo T&C El Vedado, LLC
Document #:	
Order #:	16101899

Certified Copy of Arts & Amend:	<input type="checkbox"/>	FILED 2025 JAN 21 AM 9:47 TALLAHASSEE, FL CLERK OF SUPERIOR COURT	
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Amount: \$ **155.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Grupo T&C El Vedado, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Sebastian Garcia
Name of Person
Silva's Financial Services
Firm/Company
5220 S. University Drive, Suite C-102
Address
Davie, FL 33328
City/State and Zip Code
accounting7@silvasfinancialservices.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Deborah Scherer at (305) 579-7720
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

**ARTICLES OF ORGANIZATION
OF
GRUPO T&C EL VEDADO, LLC**

ARTICLE I – Name

The name of the limited liability company is **GRUPO T&C EL VEDADO, LLC** (the “Company”).

ARTICLE II - Address

The mailing address and street address of the principal office of the Company is 5220 S. University Drive, Suite C-102, Davie, Florida 33328.

ARTICLE III- Management

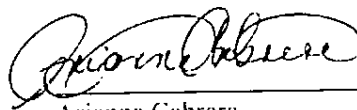
The Company shall be managed by its managers, as set forth in the Company’s Operating Agreement, and is therefore a manager-managed company. The name and address of the initial manager of the Company is: Victor William Ticona Cuadros – 5220 S. University Drive, Suite C-102, Davie, Florida 33328.

ARTICLE IV - Registered Agent and Office

The street address of the Company’s initial registered agent and office is 5220 S. University Drive, Suite C-102, Davie, Florida 33328, and the name of its initial registered agent at such office is Silvas Financial Services, LLC.

In accordance with Section 605.0203(1)(b) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Dated this 17 day of January, 2025.



Arianna Cabrera
Authorized Representative

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ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned, having been named as Registered Agent and to accept service of process for **GRUPO T&C EL VEDADO, LLC.** at the place designated in these Articles of Organization, hereby accepts the appointment as registered agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Florida Statutes Chapter 605.

Dated this 17 of January, 2025.

Silvas Financial Services, LLC

By: 
Name: MARIO SILVA
Title: CPA

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