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#### FLORIDA LIMITED LIABILITY CO.

#### Gonzalez Calzado Consulting Group LLC

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Electronic Filing Menu Corporate Filing Menu

Help

# Articles Of Organization For Florida Limited Liability Company

### Article I

The name of the Limited Liability Company is:

Gonzalez Calzado Consulting Group LLC

#### **Article II**

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

2 S Biscayne Boulevard Suite 3200 #5019 Miami, Florida, 33131 United States

The mailing address of the Limited Liability Company is:

2 S Biscayne Boulevard Suite 3200 #5019
Miami, Florida, 33131
United States

#### Article III

Other provisions, if any:

Any and all lawful business

2024 JAN 24 PM 4: 31

### **Article IV**

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

### **USA CORPORATION SERVICES**

Lupa Enterprises INC

100 SE 2nd Street Suite 2000 Miami, Florida, 33131 United States

+1 (727) 298-8007

info@usacorporationservices.com

Luciana Mordini

Registered Agent's Signature

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..

## Article V

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

Title: MGRM

Jaime Rodolfo Gonzalez Calzado

Address: Paseo Foster 130 Paseo del Vergel

Monterrey

NL

Mexico 64988

Fax: +18885334730

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Fax: +18506176381 usacorporationservices - USACorporation

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# Article VI

The effective date for this Limited Liability Company shall be:

01 / 23/ 2025

Jaime Rodolfo Gonzalez Calzado

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

Jaime Rodolfo Gonzalez Calzado

Name of signee

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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.