

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.

(((H25000058944 3)))



H2500005894434BC4

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 : EXPRESS BUSINESS & TAX SERVICES INC

Account Number : I20220000138 Phone : (786)239-9353 Fax Number : (305)675-8465

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

Email	Address:			
Emall.	Address:			

025 FEB 17 AM 9: 19

FLORIDA LIMITED LIABILITY CO. INFINITY BUILD TECH, LLC.

Certificate of Status	1
Certified Copy	j
Page Count	04
Estimated Charge	\$160.00

25 FEB 17 AM 7:

FILED STATE

Electronic Filing Menu

Corporate Filing Menu

Help



COVER LETTER

	ing Section of Corporations	
	INITY BUILD TECH, LLC.	
SUBJECT:	Name of Lumted Liability Company	
The enclosed Arti	cles of Organization and fee(s) are submitted for filing.	
Please return all c	orrespondence concerning this matter to the following:	
JUAN	N G ALVAREZ	
	Name of Person	
INFI	NITY BUILD TECH, LLC.	
	Firm/Company	
415 V	VARREN BAYOU LN	
	Address	
PAN.	AMA CITY, FL 32407	
AIME	City/State and Zip Code I@EXPRESSTAXSVCS.COM	
	E-mail address: (to be used for future annual report notification)	
For further informa	tion concerning this matter. please call:	
JUAN	G ALVAREZ 305 364-5123 at ()	
	Name of Person Area Code Daytime Telephone Number	
Enclosed is a chec	ck for the following amount:	
□\$125.00 Filing	Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Mailing Address New Filing Section Division New Filing Section Division	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Montoe Street, Suite 810 Tallahassee, FL 32303



From: Aimet Arenas

INFINITY BUILD TECH, LLC	
(Must contain the words "Limited Lia	hility Company, "L.E.C.," or "LEC.")
ICLE II - Address:	
nailing address and street address of the principal offic	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
415 WARREN BAYOU LN	415 WARREN BAYOU LN
PANAMA CITY, FL 32407	PANAMA CITY, FL 32407

JUAN G ALVAREZ		
	Name	
415 WARREN BAYO	DU LN	
Florida street address	(P.O. Box <u>NOT</u> ac	cceptable)
PANAMA CITY	FL	32407
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..

(CONTINUED)

Quan G. Alvarez

Registered Agent's Signature (REQUIRED)

.1	RT	ľŧ.	\sim	1	r, I	ı	٠.
	пι				г. І		

Page: 4 of 4

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

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager	r	
AMBR	JUAN G ALVAREZ	
	415 WARREN BAYOU LN	<u> </u>
	PANAMA CITY BEACH, FL 32407	_
AMBR	DANIEL E ALVAREZ	
- HABIC	1301 SW 142ND AVE APT H104	
	PEMBROKE PINES, FL 33027	
AMBR	VINCENZO A IAFAIOLI	
AMIDA	16835 SW 49TH CT	
	MIRAMAR, FL 33027	_
		
		<u> </u>
(Use attachment if necessary)		
(If an effective date is listed, the date mu the date of filing.)	the date of filing:	
ARTICLE VI: Other provisions, if any.		
		
REQUIRED SIGNATURE:		
	Juan G. Alvarez e of a member or an authorized representative of a member.	
Signature	e of a member or an authorized representative of a member.	
This document	is executed in accordance with section 605.0203 (1) (b), Florida Statute	2 S.
l am aware that constitutes a this	any false information submitted in a document to the Department of Stard degree felony as provided for in s.847.155, F.S.	ite
		- 3
JUAN G	ALVAREZ Typed or printed name of signee	25
	. Theo at laured mine at affine	E)
	Filing Fees:	Ċ

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)



35