

L250000083148

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H25000071889 3)))



H250000718893ABC7

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 FILINGS INC
Account Number : 120220000042
Phone : (786)370-2432
Fax Number : (786)866-6349

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

Email Address: manoloian2004@yahoo.com

FLORIDA LIMITED LIABILITY CO.
MARITE ATELIER LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED

2025 FEB 25 PM 12:53

FILED

2025 FEB 25 AM 4:59

STATE OF FLORIDA

(((H25000071889 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARITE ATELIER 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:8520 SW 133RD AVE RD APT 313
MIAMI, FL 33183Mailing Address:8520 SW 133RD AVE RD APT 313
MIAMI, FL 33183**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:

TOBIAS ESPANA, MARIA A.

Name

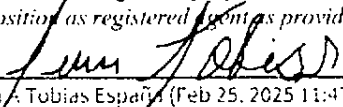
8520 SW 133RD AVE RD APT 313Florida street address (P.O. Box **NOT** acceptable)MIAMI

City

FL33183

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.


Maria A. Tobias España (Feb 25, 2025 11:47 EST)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H25000071889 3)))

(((H25000071889 3)))

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:

TOBIAS ESPANA, MARIA A.

8520 SW 133RD AVE RD APT 313

MIAMI, FL 33183

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:**

Maria / Tobias España (Feb 25, 2025 11:47 EST)

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.

TOBIAS ESPANA, MARIA A.

Typed or printed name of signer

2025 FEB 25 AM 4:53
DEPT OF STATE
FEB 25 2025

(((H25000071889 3)))