

**U230000250873**

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.

((H23000025087 3))



H230000250873ABC.

**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 : KCO SERVICES, LLC  
 Account Number : I20200000018  
 Phone : (954)744-6605  
 Fax Number : (833)648-2730

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

Email Address: lis\_matheus@hotmail.com

**FLORIDA LIMITED LIABILITY CO.  
 MULTITRANSPORTE HIDALGO LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

04:11:40  
 2023 JUN 20 PM 03:05

23 JUN 20 PM 03:05

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MULTITRANSPORTE HIDALGO 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:

Mailing Address:

101 South Federal Highway Apt 314  
Boynton Beach, FL 33435

101 South Federal Highway Apt 314  
Boynton Beach, FL 33435

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:

KCO SERVICES LLC

Name

7717 PADDOCK PL

Florida street address (P.O. Box **NOT** acceptable)

DAVIE FL 33328

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

23 JUN 2023 11:10:35

**ARTICLE IV -**

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

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member "MGR" = Manager	
MGR _____	WUILMER JOSE HIDALGO ORTEGA 101 South Federal Highway Apt 314 Boynton Beach, FL 33435
MGR _____	LISBEL DEL VALLE MATHEUS SOSA 101 South Federal Highway Apt 314 Boynton Beach, FL 33435
MGR _____	REGULO ENRIQUE FLEN STERLING 101 South Federal Highway Apt 314 Boynton Beach, FL 33435
_____	_____
_____	_____

(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:  
The purpose for which this Limited Liability Company is Organized is:  
Any and All Lawful Business

**REQUIRED SIGNATURE:**



**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.

WUILMER JOSE HIDALGO ORTEGA  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**  
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)