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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H23000011203 3))



H230000112033ABCM

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 : LATIN AMERICAN TAXPRO  
Account Number : I20220000106  
Phone : (407)318-0823  
Fax Number : (561)467-5851

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

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
EXPRESS SERVICE SOLUTIONS LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

2023 JAN 20 11:12:06

23 JAN 20 11:12:35

ex

H23000011203 3

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: CIOFFI EXPRESS SERVICES LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTONIO CIOFFI

Name of Person

Firm/Company

3717 GRANDEWOOD BLVD APTO 1016

Address

ORLANDO, FLORIDA, 32837

City/State and Zip Code

ANTONIOCIOFFIR@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO CIOFFI

407

953-1745

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

23 JAN 20 11:51:55

H23000011203 3

# H23000011203 3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CIOFFI EXPRESS SERVICES 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:

3717 GRANDEWOOD BLVD APTO 1016  
ORLANDO, FLORIDA, 32837

Mailing Address:

3717 GRANDEWOOD BLVD APTO 1016  
ORLANDO, FLORIDA, 32837

### 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:

ANTONIO CIOFFI

Name

3717 GRANDEWOOD BLVD APTO 1016

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

<u>ORLANDO</u>	<u>FL</u>	<u>32837</u>
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..*

Antonio Cioffi

Registered Agent's Signature (REQUIRED)

(CONTINUED)

23 JAN 20 11:12:35

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ARTICLE IV-

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

**Title:**  
"AMBR" = Authorized Member  
"MGR" = Manager

**Name and Address:**

<u>MGR</u>	<u>ANTONIO CIOFFI</u> <u>3717 GRANDEWOOD BLVD APTO 1016</u> <u>ORLANDO, FLORIDA, 32837</u>
<u>MGR</u>	<u>MICHELE CIOFFI TROTTA</u> <u>3717 GRANDEWOOD BLVD APTO 1016</u> <u>ORLANDO, FLORIDA, 32837</u>
<u>MGR</u>	<u>YUSMELYS REYES SANTIAGO</u> <u>3717 GRANDEWOOD BLVD APTO 1016</u> <u>ORLANDO, FLORIDA, 32837</u>
_____	_____
_____	_____

(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:**

*Antonio Cioffi*

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.

ANTONIO CIOFFI

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)

23 JUN 20 PM 12:35

H23000011203 3



January 19, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LATIN AMERICAN TAXPRO

SUBJECT: CIOFFI EXPRESS SERVICES LLC  
REF: W23000005501

23 JAN 23 11:13:53

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Genesis R Kersey  
OPS Clerk

FAX Aud. #: H23000011203  
Letter Number: 423A00001351

850-617-6381

1/17/2023 4:08:08 PM PAGE 1/001 Fax Server



January 17, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LATIN AMERICAN TAXPRO

SUBJECT: CIOFFI EXPRESS SERVICES LLC  
REF: W23000004681

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must type the complete/legal name of the individual(s) signing the document in each signature block.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana  
Regulatory Specialist II

FAX Aud. #: H23000011203  
Letter Number: 323A00001128

23 JAN 19 11:12:55

850-617-6381

1/11/2023 10:59:32 AM PAGE 1/001 Fax Server



January 11, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LATIN AMERICAN TAXPRO

SUBJECT: EXPRESS SERVICE SOLUTIONS LLC  
REF: W23000003228

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Genesis R Kersey  
OPS Clerk

FAX Aud. #: H23000011203  
Letter Number: 823A00000772