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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARISSES OF C. 23 OFFICE USE ONLY (DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 2. (Corporation Name) (Document #) (Document #) 4. (Corporation Name) (Document #) Walk in Pick up time Certified Copy. Mail out Will wait Certificate of Status Photocopy NEW FILINGS AMENDMENTS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger OTHER FILNGS REGISTRATION/ QUALIFICATION Annual Repotit Foreign Fictitious Name Limited Partnership Name Reservation

> Reinstatement Trademark

> > Examiner's Initials

Other

CR2E031(9/92)

| ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY |
|---|
| ARTICLE I - Name: The name of the Limited Liability Company is: West COAS + Appraisal Specialist Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: |
| 6870 500 50 Herapae Miami FC 33155 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: Terunudo Herunude |
| 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 608, F.S. |
| Registered Agent's Signature |
| Article IV - Management (Check box if applicable,) |
| The Limited Liability Company is to be managed by one manager or more managers and is, |
| Agen - Fernando Hernandez (6870 5W 50 Herrace Minni FL331) |
| Agent YOUANI RIVERA (138215W24St. MIAMIFL |
| (An additional article must be added if an effective date is requested) |
| Signature of a member or an authorized representative of a member. |
| (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) |
| Typed or printed name of signee |

FILING FEES:
\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)