LAZAKUS UURPURA

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20008000019 Phone : (305)552-5973

Fax Number : (305)675-5944

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Email	Address:				

## FLORIDA LIMITED LIABILITY CO. LEMI LLC.

## Certificate of Status 1 Certified Copy 0 Page Count 03 Estimated Charge \$130.00

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must and with the words "Limited Liability Company,

Lemi LLC.

**ARTICLE II - Address:** 

The mailing address and street address of the principal office of the Limited Liability Company is: 16084 Sw 86th tee

Momi, FL 33193

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (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.)

> Monique Medley 10734 Sw 173 Ter Miami FL 3315#

<u>ARTICLE IV-</u>

The name and title of each person authorized to manage and control the Limited 10734 Sw 173 Ter Liability Company:

Miami, FL 33157 Donald Jeff Cajuste, (AMBR) Wondirad Hailemariam, (AMBR)

## Required Signatures:

Wardinad Hailemariam Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Wondirad Hailemariam Wood
Typed or printed name of signee

Donald Jeff Cogustie

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..