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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 : (305)552-5973 Fax Number : (305)675-5944

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

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FLORIDA LIMITED LIABILITY CO. KREDIBLE FINANCIAL LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	- Name:
---------	---------

3052201440

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

Kredible Financial LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability

17121 Collins ave Apt 3606

Sunny isles FL 33160

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Limbility) Company-cunnot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

DS Capital Group

17121 COLLINS AVE APT 3606 SUNNY ISLES FL 33160

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

capital Group inc AMBR

RB Capital Group inc AMBR

3052201440

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.

Ryan Balon

Typed or printed name of signee

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 us provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)