Division of Corporation **Electronic Filing Cover Sheet**

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Division of Corporations

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Email Address:_

FLORIDA LIMITED LIABILITY CO. TRAPBACHI YAKI LLC

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

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Corporate Filing Menu

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Trapbachi Yaki 11c			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liab Company is:			ı
16261 Sw 95th Jane Migmi FL 33196			
			
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.)	lity		
Michael Posada			
16261 Sw 95th Lane Miami Fl	331	96	
	SEC ALL	2022	
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	RETARY OF	BW	7 11
Michael Posada (AMBR)	F STAT	:Z 14.	
Guilbaud Wouillio (AMBR)	D ·	-	
Rafael emilio Santos (AMBR)		 -	
			

Required Signatures:

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.

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

gent's Signature (REQUIRED)