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| From:      |                |                                     | <u> </u>         |            | l i |
|            | Account Name   | : LAZARUS CORPORATE FILING SERVICE, |                  | ·          |     |
|            | Account Number | : I2000000019                       |                  | ) <u> </u> | ~   |
|            | Phone          | : (305)552-5973                     |                  |            |     |
|            | Fax Number     | : (305)675-5944                     | <b>C</b>         |            |     |

\*\*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. RBT FOR SPECIAL KIDS LLC

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

ZMA REQUEST

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Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:   | 2022 .<br>SEC<br>TALL                    |
|---|--|
| ARTICLE II - Address  | JAN 19 PH 1<br>RETARY OF S<br>AHASSEE FL |
| The mailing address and street address of the principal office of the Limited Company is:  1038/ Su) 68 Lone Miami FL 33/73   | Liability A                              |
|   |  |
| ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Limited Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  Leydy Cariclad Bajuelos  10381 6w 68 Lane miami fl | Liability<br>33173                       |
| ARTICLE IV The name and title of each person authorized to manage and control the Limit Liability Company: (MGR or AMBR)  Leeply Caridad Bajvelos (AMBR)  | æd                                       |
|   |  |
|   |  |

## Required Signatures:

| I De la companya della companya della companya de la companya della companya dell |          |      |      |
|--|----------|------|------|
| Signature of a member or an authorized representative of a m   | -        |      |      |
| and any of a market representative of a m  | ıembeı   | r.   |      |
| In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of the constitutes an affirmation under the penalties of perjury that the facts stated here I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S.  Layly Caridad Boycelos  Typed or printed name of signee   | is docum | nent | T ED |

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..

Registered Agent's Signature (REQUIRED)