

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CLARA GIRALDO ENROLLED AGENT
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

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.
THE FAO PROJECT, LLC.

Certificate of Status	0
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Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF
THE FAO PROJECT, LLC.**

ARTICLE I - NAME

The name of the Limited Liability Company is:

THE FAO PROJECT, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**4519 SW 75AVE
MIAMI, FL. 33178**

The mailing address shall be:

**4519 SW 75AVE
MIAMI, FL. 33178**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

ABRAHAM CASANOVA

4519 SW 75AVE
Florida Street address (P.O.BOX NOT acceptable)
MIAMI, FL 33178
City, State, and Zip

2022 Jan 22 PM 2:19

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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ABRAHAM CASANOVA
4519 SW 75AVE
MIAMI, FL. 33178

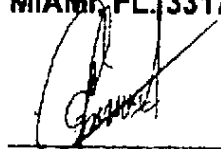
AMBR

ORLANDO MENDOZA
4519 SW 75AVE
MIAMI, FL. 33178

MANAGER

ROSARIO QUINTANILLA
4519 SW 75AVE
MIAMI, FL. 33178

MANAGER



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.)

ABRAHAM CASANOVA

Typed or printed name of signee

01/22/2022 11:19:19