

7/25/22, 2:50 PM

Division of Corporations

Florida Department of State
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To:
 Division of Corporations
 Fax Number : (850)617-6381

From:
 Account Name : HUBCO
 Account Number : 104662003400
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 Fax Number : (516)935-3088

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

Email Address: BIGAPPLEENTERTAINMENT@GMAIL.COM

**FLORIDA LIMITED LIABILITY CO.
 BIG APPLE ENTERTAINMENT LLC**

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

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 TALLAHASSEE, FLORIDA

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H22000251496

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BIG APPLE ENTERTAINMENT LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

5460 N STATE RD 7, STE 108
NORTH LAUDERDALE, FL 33319

5460 N STATE RD 7, STE 108
NORTH LAUDERDALE, FL 33319

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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.)

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

CHARLES V ROULET
Name

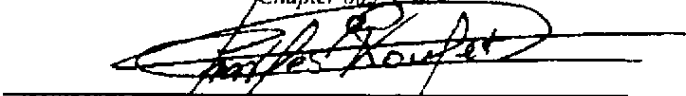
2997 NW 95TH AVE
Florida street address (P.O. Box NOT acceptable)

CORAL SPRINGS FL 33065
City Zip

22 JUL 25 PM 1:11
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FALLAHASSEE, FL 32909
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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)

CHARLES V ROULET

(CONTINUED)

H22000251496

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

CHARLES V ROULET

2997 NW 95TH AVE

CORAL SPRINGS, FL 33065

AMBR

HARRY ROULET

2997 NW 95TH AVE

CORAL SPRINGS, FL 33065

AMBR

SEBASTIEN C ROULET

2997 NW 95TH AVE

CORAL SPRINGS, FL 33065

AMBR

EMMENUEL F ROULET

2997 NW 95TH AVE

CORAL SPRINGS, FL 33065

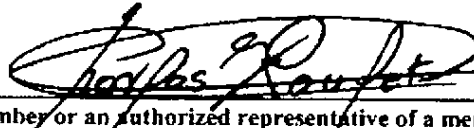
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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.)

CHARLES V ROULET

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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