

To:

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From: Yanet Avila

5/21/24, 2:43 PM

Division of Corporations

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Florida Department of State

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.  
AMBER DESIGN ONE LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

AMBER DESIGN ONE LLC

(Must contain 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:

614 ROCHESTER LOOP  
DAVENPORT FLORIDA 33897

614 ROCHESTER LOOP  
DAVENPORT FLORIDA 33897

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:

L & J ACCOUNTING INC  
Name

13499 BISCAYNE BLVD SUITE M4  
Florida street address (P.O. Box **NOT** acceptable)

NORTH MIAMI                      FL                      33181  
City                                      State                                      Zip

*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 60, F.S..*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

AMBR

GIANCARLO ARIEL CHAVEZ
614 ROCHESTER LOOP
DAVENPORT FLORIDA 33897

AMBR

XIAOHUI XIA CHAVEZ
614 ROCHESTER LOOP
DAVENPORT FLORIDA 33897

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(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.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Handwritten signature of Giancarlo A. Chavez

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

GIANCARLO ARIEL CHAVEZ
Typed or printed name of signee