## Division of Corporatus Office of Corporatus

## Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

## LIMITED LIABILITY COMPANY

GRUPPO COGNOSCENTI, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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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:

Gruppo Cognoscenti, LLC

ARTICLE II - Address:

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

18305 Bis cayne Blvd. Suite 216 Aventura, FL 33160 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Ronald Welch

18305 BISCAYNE Bluet, #216
Florida street address (P.O. Box NOT acceptable)

Aventura FL 33160 City, State, and 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 608, F.S.

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Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Ronald Welch
Typed or printed name of signer

Filing Pees:

\$100.00 Filing Fee far Articles of Organization

5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 S.00 Certificate of Status (Optional)

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