## L04000048737

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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## TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

1.0. DOX 002					
Tallahassee, FL 3	2314	·-		<u>.</u>	2
SUBJECT:	Centave Group, LLC	<del>.</del> .			The Contract of the Contract o
(Propo	sed limited liability company name - must include su	ıffix)		750	13 65 K
Enclosed is an or	iginal and one (1) copy.			A55K	FILEU SORPHONE
Filing fee for arti	cles of organization of Florida Limited Liab	oility Compar	ıy:		OR THE STATE OF TH
:	\$ 100.00 Filing fee for Articles of Organizat	ion			
5	\$ 25.00 Designation of Registered Agent				
1	\$ 30.00 Certified Copy	. –			
:	\$ 5.00 Certificate of Status				
certificate of state	wledgement will be issued free of charge u us is needed. The fee for a certified copy is the Florida Department of State.	=			
FROM: Carlos Fl	ores				
Name (Pri	nted or typed)		·		
255 73 <sup>rd</sup> Address	Street South				
St. Peter City, State	sburg, FL 33707 & Zip			÷	
<u>(727) 344</u> Daytime T	1-4244 elephone number				

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANYALLA, And The Company of the Comp

### **ARTICLE I - Name:**

The name of the Limited Liability Company is: Centave Group, LLC

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: 255 73rd Street South, St. Petersburg, Florida 33707

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

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

Carlos Flores Name

255 73rd Street South Florida street address (P.O. Box NOT acceptable)

> St. Petersburg, FL 33707 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 a am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F. S.

Article IV - Management

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

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,)

> Carlos Flores Typed or printed name of signee

Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)