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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146

Phone

(305) 444-4994

Fax Number

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LIMITED LIABILITY COMPANY

AMSTEAD GROUP, LLC

Certificate of Status	0
Certified Copy	1.
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

https://efile.sunbiz.org/scripts/efilcovr.exe

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		1	
ARTICLE I - Name:		, 1	
The name of the Limited Liability Con	npany is:		
		1 1 1	
Amstead Group, LLC		<u> </u>	
ARTICLE II - Address:		:	
The mailing address and street address	of the principal office of the	he Limited Liability Company is:	
Principal Office Address:	Mailing Addre	`. \$5:	
490 NE 101 Street	490 NE 101 Stree	t (
Miami Shores, FLorida 33138	Miami Shores, FL	orida 33138	
The name and the Florida street address Mark Bloom	Name		
490 NE 101 Street			
Florida	street address (P.O. Box NOT	acceptable)	
Miami Shores	FL 33138		
City, State, and Zip		T _S 23	
Having been named as registered agent liability company at the place design registered agent and agree to act in this	acted in this certificate, I her	reby accept the appointment as 💍 😇	
statutes relating to the proper and con			• • ·
accept the obligations of my position		vided for in Chapter 608, F.Sm	1
1	147		E U
			<u> </u>

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	i J
"MGRM" = Managing Member	ļ
MGRM	Mark Bloom
	490 NE 101 Street
·	Miami Shores, FLorida 33138
MGRM	Anny Bloom
	490 NE 101 Street
	Miami Shores, FLorida 33138
MGRM	Jom Konash
	490 NE 101 Street
	Miami Shores, FLorida 33138
MGRM	Sarah Konash
INICI KIVI	490 NE 101 Street
	Miami Shores, FLorida 33138

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

Mark Bloom

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fcc for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE

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ADDITIONAL MEMBER OF THE LLC

(MGRM)

JAMES KEITH

490 NE 101 STREET

MIAMI SHORES, FLORIDA 33138

(MGRM)

ELIZABETH KEITH

490 NE 101 STREET

MIAMI SHORES, FLORIDA 33138

2004 KOV 17 AN IO: 54
SECRETARY OF STATE
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