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PICK-UP WAIT MAIL		
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# LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOC	CUMENT NUMBER(S), (if known):
INTERNATIONAL	PRAETORIAN CONSULTANTS L
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(Corporation Name)	(Document #)
Walk in Pick up time	2.00 Certified Copy
☐ Mail out ☐ Will wait	Photocopy
Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

**Examiner's Initials** 

## COMPA ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMI ARTICLE I - Name: The name of the Limited Liability Company is: INTERNATIONAL PRAETORIAN CONSULTANTS LLC **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Mailing Address: Principal Office Address:** 17001 NE 9TH AVE SUITE 14-C 17001 NE 9TH AVE SUITE 14-C NORTH MIAMI FL 33162 NORTH MIAMI FL 33162 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: BETTY B. HANSACK Name 17001 NE 9TH AVE SUITE 14-C Florida street address (P.O. Box NOT acceptable)

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..

Registered Agent's Signature

City, State, and Zip

NORTH MIAMI FL 33162

(CONTINUED)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	BETTY B. HANSACH
	17001 NE 9TH AVE SUITE 14-C
	NORTH MIAMI FL 33162
MGRM	VERUSCHKA VIDAL
	17001 NE 9TH AVE SUITE 14-C
	NORTH MIAMI FL 33162
(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.)

BETTY B. HANSACK

Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)