# OSDAN 95417

Division of Corporations Public Access System

### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H050002301113)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPAN

Account Number: 072450003255 Phone: (305)634-3694

Fax Number : (305) 633-9696

## LIMITED LIABILITY COMPANY

investment synergy, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

15-95911

Breather Line Abuse

Compension Filips

Public Access Help

# (3)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE ! - Name:

The name of the Limited Liability Company is:

INVES	TMĖNT	SYNER	RGY,	LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	AHA	SE SE
4779 Collins Avenue, #2107	4779 Collins Avenue, #2107	TAR) ASS	28
Miami Beachi Florida 33140	Miami Beach, Florida 33140	mo	7.75
	•	77,77	
		OR TA	ά
	and the second s	Carrier and the second section is	/ F7

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:

Ernesto Arguello

4779 Collins Avenue, #2107

Florida street address (P.O. Box NOT acceptable)

Miami Beach FI 33140 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

EB-SS-S002 IO: IO ENLINE

P. 02/03

Σ0.9 JATOT

, , , s

Title: "MGR" = Manager	Name and Address:
"MGRM" + Managing Member	•
MGRM	Emesto Arguello
:	4779 Collins Ayenue, #2107
	Miami Beach, Florida 33140
i	
į	**************************************
•	
:	
	<del></del>
;	- Time S
(Usc attachment if necessary)	AH.
(Obo dictional in its incomment)	(SS)
LEV: Effective date, if other than th	e date of filing: (OPTIONA)
Ective date is listed, the date must i	be specific and cannot be more than five business day
days after the date of filing.)	PATA O
:	
REQUIRED SIGNATURE:	•
	7 1
	1-7
; = -7	
Signature of a weight	er or ap suthorized representative of a member,
(In accordance with se	cesson 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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)

Ernesta Arguello

Page 2 of 2

Typed or printed name of signee

ENP I RE 2EL-28-2002 10:10