

206000076714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

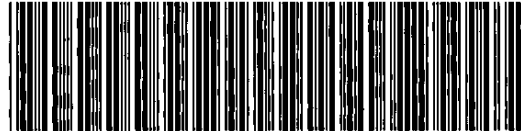
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*[Handwritten signature]*

Office Use Only



600077887426

08/03/06--01043--004 \*\*155.00

RECEIVED  
06 AUG -3 PM 12:01  
STATE  
DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

FILED  
06 AUG -3 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165

305-552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ATZI LLC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)



Walk in



Pick up time

2.00



Mail out



Will wait



Photocopy



Certified Copy



Certificate of Status

### NEW FILINGS



Profit



Not for Profit



Limited Liability



Domestication



Other

### AMENDMENTS



Amendment



Resignation of R.A., Officer/Director



Change of Registered Agent



Dissolution/Withdrawal



Merger

### OTHER FILINGS



Annual Report



Fictitious Name

### REGISTRATION/QUALIFICATION



Foreign



Limited Partnership



Reinstatement



Trademark



Other

FILED  
06 AUG - 3 PM 2:45  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Examiner's Initials

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: ATZI LLC

## ARTICLE II - Address:

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

9737 NW 41<sup>st</sup> ST Suite 467 Doral, FL 33178

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

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

MARIA PADULA

Name

9737 NW 41<sup>st</sup> ST Suite 467

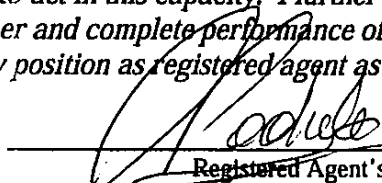
Florida street address (P.O. Box NOT acceptable)

Doral FL 33178

City, State, and Zip

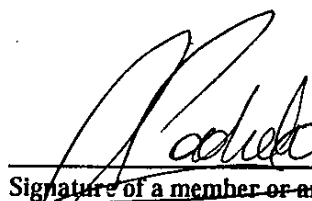
FILED  
06 AUG - 3 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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

## 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.

  
\_\_\_\_\_  
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.)

MARIA PADULA