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(Requestor's Name)
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PICK-UP WAIT MAIL
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ALLANASSE C.F. LORIG

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

ACCEPTANCE OF THE STATE OF THE

Examiner's Initials

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 200 Walk in Certified Copy ☐ Mail out ☐ Will wait ☐ Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** ■ Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

COMPANY ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY C

ART	CL	F.	I -	Nai	ne:

The name of the Limited Liability Company is:

ARTICLE II - Address:

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

rincipal Office Aduress:	Manng Address:
4530 SW 38 St	4530 SW 38 St
Hollywood, FL 33023	Hollywood, PC 3302=

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:

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

Hollywood FL 33023

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..

gent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Delfin SUAREZ 4530 SW 388+ Hollywood FL 33023
	- HOUYWAOA FC 33023
·	
(Use attachment if necessary)	
	the date of filing:, (OPTIONAL
effective date is listed, the date must O days after the date of filing.)	t be specific and cannot be more than five business days
DECLIDED CLOSE THEE.	
REQUIRED SIGNATURE:	Illa
Signature of a men	aber or an authorized representative of a member.
of this document co	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury and herein are true.)
and the second s	a
<u>Delf</u>	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)