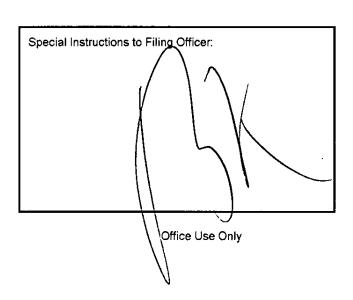
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status





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TALLAHASSEE, FLORIDA

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TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE OF STATE OF COAPGRATION

## LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time 2.60 Mail out Certificate of Status Will wait Photocopy **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)

Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TAPR 30 PH 2: 25
SECRETARY OF SURIOR
SECRETARY SEE, FLORIOR

ARTICLE I - Name:

The name of the Limited Liability Company is:

## **DESIGN HOUSE, LLC.**

ARTICLE II - Address:

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

**Principal Office Address:** 

Mailing address:

12826 SW 104<sup>TH</sup>. PLACE Miami, Fl. 33176

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:

Keith Paulen

Keith Paulen 12826 SW 104<sup>th</sup>. Place Miami, Fl. 33176

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.

Page 1 of 2

(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

Manager

Keith Paulen 12826 SW 104<sup>th</sup>. Place Miami, Fl. 33176

Keith Paulen

(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.)