## L08000024663

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
·		
		·

Office Use Only



200119100132

03/10/08--01011--014 \*\*155.00



B. KOHR
MAR 1 0 2008

EXAMINER

PILED

08 MAR 10 PM 2: 20

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## LAZARUS CORPORATE FILING SERVICE 3320 SW 87<sup>TH</sup> AVENUE MIAMI, FL 33165 305-552-5973

TALLAHASSEE FLORING

and the second second	Office Use Only
CORPORATION NAME(S) & DOCUME	NT NUMBER(S), (if known):
AFM FAM	1Ly LC
(Corporation Name)	(Document #)
2.	
(Corporation Name)	(Document #)
3.	
(Corporation Name)	(Document #)
1	
(Corporation Name)	(Document #)
Walk in Pick up time 2	- 60 Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit	Amendment Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication Other	Dissolution/Withdrawal
Guiei -	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership Reinstatement
	Trademark
· ·	☐ Other

Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

ARTICLE II - Address:

The name of the Limited Liability Company is:

560 EAST 52 ST HIAGRAM, FC 33010

FAMILY LLC

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

AMAROLO VIIA
Name
SGO ENT VZ VT
Florida street address (P.O. Box NOT acceptable)
★/1のほれん FL 33 0/ (City, State, and Zip
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
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.
(An additional article must be added if an effective date is requested)  Signature of a member or an authorized representative of a member.
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.)  Amarco Diaz  Typed or printed name of signee
FILING FEES:

The mailing address and street address of the principal office of the Limited Liability Co

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

\$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)