Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. CIRCLE OF WEALTH CLUB LLC.

Certificate of Status

1

Certified Copy-

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03

**Estimated Charge** 

\$130.00

G. MCLEOD

Electronic Filing Menu

Corporate Filing Menu

JAN 19 担付p

EXAMINER

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
CIRCLE OF WEALTH CLUB LLC	•
(Must end with the words "Limited Liability Company, "L.L.C.," or "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:	
6800 S.W 40.5T. \$483 Same	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an ind business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:	
Name	S
6800 S.W 40 ST. # 483	SEC -
Florida street address (P.O. Box NOT acceptable)	
MIAM1, FL. 33155 City, State, and Zip	10:33 10:33
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept registered agent and agree to act in this capacity. I further agree to comply we statutes relating to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent as provided for in Registered Agent's Signature (REQUIRED)	the appointment as ith the provisions of all am familiar with and
(CONTROLLED)	

(CONTINUED)

Page 1 of 2

## H11000013642

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	
MGRM	JUAN FL CABRERA  GROO SIW YOST A  MIAMILEL, 33155
<u>ugrm</u>	MAGDALENA P. CABRERA 6800 S.W 40ST #483 MIAMI, FL. 33155
(Use attachment if necessary)	
LE V: Effective date, if other the ffective date is listed, the date is larged days after the date of filing.)  REQUIRED SIGNATURE:	nust be specific and cannot be more than five business day member or an authorized representative of a member.
LE V: Effective date, if other the ffective date is listed, the date is larged days after the date of filing.)  REQUIRED SIGNATURE:	nust be specific and cannot be more than five business day member or an authorized representative of a member.
LE V: Effective date, if other the ffective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a (In accordance with seconstitutes an affirmation is a may after any false)	nust be specific and cannot be more than five business day
ILE V: Effective date, if other the ffective date is listed, the date is lated, the date is days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a  (In accordance with seccenstitutes an affirmation I am aware that any false constitutes a third degree.	member or an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, the information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2