Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. **BAD BOYS CUSTOM LLC**

Certificate of Status	1
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Corporate Filing Menu

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ARTICLE 1 - Name:

H11000189678

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
BOO BOYS CUS (Must end with the words "Limited Liability	ity Company, "L.I.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
299475 DIXIUHTWY Homestead fl 33033	PD BOX 833379 Miami fi 33283
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:

Ashley Ann Talavera

29947 S DIXIE TWY

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

Home Step of FL 33033
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 (REQUIRED)

(CONTINUED)

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SECRETARY OF STATE DIVISION OF CORPORATIONS:

H11000189678

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	AShley TOLOVUS 2994IS PIXICITIMY HOMESTEGO FI 33033
(Use attachment if necessary)	
ICLE V: Effective date, if other than	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

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