

# L12 0000 23091

Florida Department of State  
Division of Corporations  
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Division of Corporations  
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**Email Address:** \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
ELITE BUSINESS OF AMERICA LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

H12000042855

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Elite Business of America 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:2444 SW. 16 St.  
Miami, FL 33145Mailing Address:2444 SW. 16 St  
Miami, FL 33145

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

James Casasnovas

Name

2444 SW. 16 St.Florida street address (P.O. Box **NOT** acceptable)Miami, FL 33145

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)

Page 1 of 2

H12000042855

H12000042855

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

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

**Title:**

"MGR" = Manager

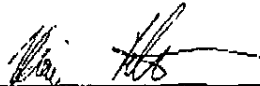
"MGRM" = Managing Member

**Name and Address:**MGRMKhari Patman  
2444 SW. 16 St.  
Miami, FL 33145MGRMJAMES CASASNOVAS  
2444 SW. 16 St  
Miami, FL 33145\_

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)**

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

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.)

KHARI PATMAN  
Typed or printed name of signer**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)

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