Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000196868 3)))



H120001966883ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To;

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name

Account Number : 104662003400

: (516) 935-3940

Fax Number

: (516)935-3088

Enter the email address for this business entity to be used for future SSE annual report mailings. Enter only one small address please.

Email Address: INFO @ WALLELINGT. COM

FLORIDA LIMITED LIABILITY CO.

Alcadada Group LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Mps://efile.sunbiz.org/scripts/efilozyr.exe

1/2

H12000196868

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Alcadada Group LLG

ARTICLE II - Address

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

Principal Office Address:	Mailing Address:		
1620 W. Oakland Park Blvd., Suite 404	24 Lexington Avenue		_
Oakland Park, FL 33311	Westbury, NY 11590	<u>,</u>	
ARTICLE III - Registered Agent, Registered The name and Florida street address of the registered age		 (`)	12
Mark Ingber,		SS 333	FIL.
	mple Road, Suite 331 Rox or Muil Drop Box NOT Acceptable)	OF SHA	
Corpl Springs	, F <u>i. 33065-3973</u>	る。) 1
	(City / State / Zlp)	· ·	

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 - Mark Ingber, CPA

ARTICLE IV - Manager(s) or The name and address of each Man	Managing Member(s): ager or Managing Member is as follows:	H12000198868
Title: "MGR" - Manager "MGRM" = Managing Member	Nume and Address:	
MGRM	Carmine Valle - 24 Lexington Avenue. Westbur	y, NY 11590
MGRM	Danjela Valle - 24 Lexington Avenue, Westbury	NY 11590
(Use attachment if necessary)		
REQUIRED SIGNATURE:	Eone Valle	
Signature (of a memberor authorized representative of a membe	r
•	ice with section 608.408(3), Florida Statutes, the execustitutes an affirmation under the penalties of perjuty are true.)	
		SEC SEC
	Carmine Valle	- 全部 第 二
	Typed or printed name of signee	-3 AI