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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

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Enter the email address for this business entity to be used for future 'stannual report mailings. Enter only one email address please.**

Empil	Address:	
rmali	AUGPESSI	

FLORIDA LIMITED LIABILITY CO. MUSCLE MADE NUTRITION LLC,

Certificate of Status	1	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$130.00	

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is: (Must end with the words "Limited Liability "L.L.C.," or "LLC.")	Company,
Muscle Made Nutrition LLC.	
ARTICLE II - Address:	7
The mailing address and street address of the principal office of the Limited I	_iability =
Company is: 15222 SW 138 terr Niami FL 33/96	~
	_
ARTICLE III - Registered Agent, Registered Office:	
The name and the Florida street address of the registered agent are: (The Limit Company cannot serve as its own Registered Agent. You must designate an individual or another but with an active Florida registration.)	ed Liability siness entity
Zachary Quicuti	_
15772 Sw 138 terr Migmi FL 33/96	
ARTICLE IV-	•. 1
The name and title of each person authorized to manage and control the Lim Liability Company:	ited
David Quicuti - AMBR	
Matthew Quicut: -AMBR	_
Zachary Quicuti - AMBR	
: "	_

. ,

Required Signatures:

' Signature of a member or an authorized representative of a member.

In accordance with section 605,0203 (1) (b), 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.

Zachary Quicuti

Typed or printed name of signee

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 605. F.S...

Registered Agent's Signature (REQUIRED)