L/6000087/63

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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RECECTATIONS AND SALES

05/09/16

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:			
The name of the Limited Lia	bility Company is:		
Osirian Consultir	ng LLC		
	and with the words "Limited	l Liability Compan	y, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and stree	et address of the principal o	ffice of the Limited	d Liability Company is:
<u>Prin</u>	cipal Office Address:		Mailing Address:
595 West First St,		595	West First St.
Riviera Beach, Fl. 33404		Riv	riera Beach, Fl. 33404
ARTICLE III - Registered	Agent, Registered Office.	& Registered Age	ent's Signature:
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registratio	& Registered Agent.	
ARTICLE III - Registered	Agent, Registered Office, any cannot serve as its own an active Florida registratio	& Registered Agent.	ent's Signature:
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	& Registered Agent.	ent's Signature:
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered	& Registered Agent. Registered Agent. n.) l agent are:	ent's Signature:
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered Malik A. Azeez	& Registered Agent. Registered Agent. n.) I agent are:	ent's Signature: You must designate an individual or
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registratio eet address of the registered Malik A. Azeez 595 West First St.	& Registered Agent. Registered Agent. nn.) d agent are: Name S (P.O. Box NOT a	ent's Signature: You must designate an individual or
ARTICLE III - Registered (The Limited Liability Comp another business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registered Malik A. Azeez 595 West First St. Florida street addres	& Registered Agent. Registered Agent. nn.) d agent are: Name S (P.O. Box NOT a	ent's Signature: You must designate an individual or

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..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager CEO/Founder / AMBR	Malik A. Azeez
	595 West First St. Riviera Beach, Fl. 33404
AMBR	Dr. Ellis J. Parker
	2601 NW 16TH Court Ft. Lauderdale, Fl. 33311
AMBR	Judith A. Larry-Berry
	595 West First St. Riviera Beach, Fl. 33404
AMBR	Andrew Williams, Jr.
	903 Buena Vista Ave. Brooksville, Fl. 34601
(Use attachment if necessary)	
CLE V: Effective date, if other than the date	e of filing: (OPTIONAL)
ffective date is listed, the date must be sp e of filing.)	ecific and cannot be more than five business days prior to or 90 days afte
If the date inserted in this block does not a	meet the applicable statutory filing requirements, this date will not be listed
cument's effective date on the Department	of State's records.
CLE VI: Other provisions, if any.	
- V-P4-11	

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Malik A. Azeez

Typed or printed name of signee

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)

SECRETARY OF STATE