

**U700223956**

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : CAPITOL SERVICES, INC.  
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Phone : (800) 345-4647  
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RELATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICE

**FLORIDA LIMITED LIABILITY CO.  
NEOLOGY MANAGEMENT GROUP LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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**ARTICLES OF ORGANIZATION  
OF  
NEOLOGY MANAGEMENT GROUP LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is: **NEOLOGY MANAGEMENT GROUP LLC**

**ARTICLE II: - Address**

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

**4973 S.W. 74<sup>th</sup> Court  
Miami, Florida 33155**

**ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

**Lissette Calderon  
4973 S.W. 74<sup>th</sup> Court  
Miami, Florida 33155**

*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.*



Lissette Calderon, Registered Agent

**ARTICLE IV: - Management**

The name and address of the manager who is authorized to manage and control the limited liability company is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	The Calderon Group 4973 S.W. 74 <sup>th</sup> Court Miami, Florida 33155

**IN WITNESS WHEREOF**, the undersigned has executed these Articles of Organization on October 26, 2017.

  
\_\_\_\_\_  
Lissette Calderon, Authorized Signer

(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 Section 817.155, Florida Statutes.)

Lissette Calderon  
\_\_\_\_\_  
Typed or printed name of signee