

# L18000065313 33ABC

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((H18000065313 33ABC))



H180000653133ABC.

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

From:  
Account Name : GM FINANCIAL GROUP  
Account Number : I19980000102  
Phone : (954)428-8899  
Fax Number : (954)428-6699

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

Email Address:

*Michelle@ASMELIVE.com*

**FLORIDA LIMITED LIABILITY CO.  
LINDA MICHELLE DE BENEDICTIS LLC**

Certificate of Status	0
Certified Copy	0
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K. PAGE  
FEB 28 2018

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

LINDA MICHELLE DE BENEDICTIS LLC

(Must contain 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:Mailing Address:1209 SE 8TH STREET  
DEERFIELD BEACH FL 33441

## 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:

LINDA MICHELLE DE BENEDICTIS

Name

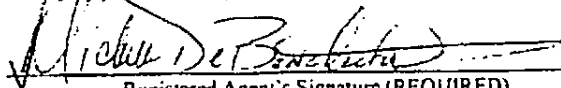
1209 SE 8TH STREETFlorida street address (P.O. Box **NOT** acceptable)DEERFIELD BEACH FL 33441

City

State

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 605, F.S.,



Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

LINDA MICHELLE DE BENEDICTIS

1209 SE 8TH STREET

DEERFIELD BEACH, FL 33441

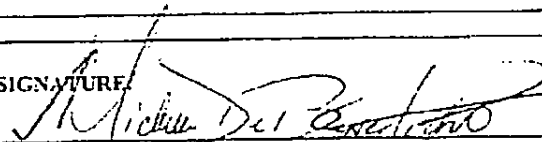
(Use attachment if necessary)

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE


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.

LINDA MICHELLE DE BENEDICTIS

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)