

4/16/2018

Division of Corporations

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

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(((H180001193173)))



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Division of Corporations  
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Account Name : BUSINESS FILINGS  
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18 APR 16 AM 9:05  
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 TALLAHASSEE, FLORIDA

APPROVED  
 AND  
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**FLORIDA LIMITED LIABILITY CO.**  
**scooters rentals italia LLC**

Certificate of Status	0
Certified Copy	1
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FAX AUDIT # H180001193173

**ARTICLES OF ORGANIZATION  
OF  
scooters rentals italia LLC**

**ARTICLE I NAME**

The name of the limited liability company is: scooters rentals italia LLC

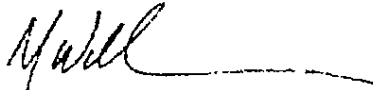
**ARTICLE II ADDRESS**

The principal place of business and mailing address of this Limited Liability Company shall be:  
1059 Collins Ave 108, Miami Beach, Florida 33139.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the registered agent are: Business Filings Incorporated, 1200 South Pine Island Road, Plantation, Florida 33324. Located in the County of Broward.

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.



Signature: \_\_\_\_\_  
Mark Williams, A.V.P. Business Filings Incorporated

Date: April 13, 2018

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE IV MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the members and the name and address of the member of the Limited Liability Company is:  
Jessica Lotzniker, 1059 Collins Ave 108, Miami Beach, Florida 33139

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**ARTICLE V DURATION**

The duration for the limited liability company shall be: Perpetual.

Jessica Lotzniker  
Jessica Lotzniker, Organizer

Date: 4/12/18

Authorized Representative

(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.)

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