# Electronic Articles of Organization For Florida Limited Liability Company

L18000120401 FILED 8:00 AM May 14, 2018 Sec. Of State wapainter

### **Article I**

The name of the Limited Liability Company is: RAINMAKERS, LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

4781 NORTH CONGRESS AVE. SUITE 154 BOYNTON BEACH, FL. US 33426

The mailing address of the Limited Liability Company is:

4781 NORTH CONGRESS AVE. SUITE 154 BOYNTON BEACH, FL. US 33426

## **Article III**

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

TED GEIGER 2742 FLORAL ROAD LANTANA, FL. 33462

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.

Registered Agent Signature: TED GEIGER

#### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: AMBR JOSEPH ESCOBAR 4781 NORTH CONGRESS AVE. SUITE 154 BOYNTON BEACH, FL. 33426

Title: AMBR PENNISI HAKEEM 4781 NORTH CONGRESS AVE. SUITE 154 BOYNTON BEACH, FL. 33426

Title: AMBR TED GEIGER 4781 NORTH CONGRESS AVE. SUITE 154 BOYNTON BEACH, FL. 33426

Signature of member or an authorized representative

Electronic Signature: JOSEPH ESCOBAR

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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