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To:

Division of Corporations

Fax Number

: (850)617-6381

from:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

#### FLORIDA LIMITED LIABILITY CO. HEREU ENTERPRISES LLC

Certificate of Status	1
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Help

### Florida Department of State

## **Attention: New Filings Section**

To whom it may concern:

This is to advise that the owners of

PEREU ENTERPRISES LCC of Document # \_ L160000 16415

are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

07/27/2018 13:08 3052201440

LAZARUS CORPORATE LAZARUS CORPORATE

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The hame of the Limited Liability Company is: (Musi and with the words "Limited Liability Company" LLC. Tor "U.C.")		
HEREU ENTERPRISES LLC	ty,	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  PRINCE TON F1 33032	ţy	
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Limited Liability Company connot serve as its own Registered Agent. You must designate an individual or another business en with an active Florida registration.)	iny tity	
Princeton FL 33032		
ARTICLE IV- The name and title of each person authorized to manage and control the Limited Liability Company:  - YESSENIA HENEU (MGN)  FLAT	2018 JUL 30 AM 11: 30	
	,	

07/27/2018 13:08

3052201440

3052201448

LAZARUS CORPORATE LAZARUS CORPORATE

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Required Signatures:

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

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.

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..

ent's Signature (REQUIRED)