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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
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.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
LUXURY CUTS GROUP LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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COMMERCIAL
FILING SERVICES

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August 10, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAZARUS CORPORATE FILIG SERVICE, INC

SUBJECT: LUXURY CUTS GROUP LLC

REF: W18000072599

We have received your document for LUXURY CUTS GROUP LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

The designation of the registered agent must be at a Florida street address.

The registered agent address is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Catherine M Wood
Regulatory Specialist II

FAX Aud. #: H18000233073
Letter Number: 018A00016503

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

FIN: 83-1418450

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company," "LLC," or "L.C.")

LUXURY CUTS GROUP LLC

ARTICLE II - Address:

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

9973 SW 142 AVE

Miami FL 33186

ARTICLE III - Registered Agent, Registered Office:

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

GENERAL CONSULTING SERVICES GROUP CORP.

14335 SW 120 ST #24

Miami, FL 33186

ARTICLE IV-

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

LIVAN CAZDENAS MBR 50%

LEONIS VIALMONTE MBR 50%

08/10/2018 14:20 3052201440
08-02-18;10:45AM;From:

LAZARUS CORPORATE

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To: 3052201440

;3053800822

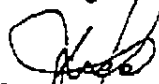
2/ 2

Required Signatures:

LEONIS VIANORTE

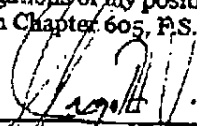
Signature of a member or an authorized representative of a member.

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.



Typed or printed name of signee

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)

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