## **Division of Corporations Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1288000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA LIMITED LIABILITY CO. THE BEST ALWAYS FOR YOU LLC

Certificate of Status	1
Certified Copy	Ō
Page Count	03
Estimated Charge	\$130,00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLE I - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The flame of the Limited Liability Company is:
THE BEST ALWAYS FOR YOU LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
8180 NW 36 ST SUITE 321
DOKAL FL 33166
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.)
Menso de la cobidad B2Anca.
8180 NW 36 ST SUITE 321
DORAL FL 33/66
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
MINSU DE LA CARIDAD BIRNEA
(AMBR)
THE 3

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 6e5, F.S..

Registered Agent's Signature (REQUIRED)