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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855) 498-5500 Fax Number : (800) 432-3622

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

Email Address:

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FLORIDA LIMITED LIABILITY CO. FRIENDS IN BUSINESS LLC

Certificate of Status	0
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Estimated Charge	\$155.00



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ARTICLES OF ORGANIZATION OF FRIENDS IN BUSINESS LLC

ARTICLE I: - Name

The name of the Limited Liability Company is:

FRIENDS IN BUSINESS LLC

ARTICLE II: - Address

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

16785 SW 10th Street Pembroke Pines, FL 33027

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

Lawrence Popritkin 16785 SW 10th Street Pembroke Pines, FL 33027

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.

LAWREN**CE POPRIJKI**N

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on December 10, 2018.

Lawrence Popritkin, Authorized Signer

(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 Section 817.155, Florida Statutes.)

Lawrence Popritkin
Typed or printed name of signee

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