

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L19000149070
FILED 8:00 AM
June 05, 2019
Sec. Of State
mdconway

Article I

The name of the Limited Liability Company is:

AUTHENTICATED LINES LLC

Article II

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

6053 SW 19TH PLACE,
NORTH LAUDERDALE, FL. 33068

The mailing address of the Limited Liability Company is:

6053 SOUTHWEST 19TH PLACE, NORTH LAUDERDAL
NORTH LAUDERDALE, FL. 33068

Article III

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

MCKENZIE SYLVESTRE
6053 SW 19TH PLACE,
NORTH LAUDERDALE, FL. 33068

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: MCKENZIE SYLVESTRE

Article IV

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

Title: AMBR
MCKENZIE SYLVESTRE
6053 SOUTHWEST 19TH PLACE,
NORTH LAUDERDALE, FL. 33068

Title: AMBR
JOANN FLEARY
6053 SW 19TH PLACE,
NORTH LAUDERDALE, FL. 33068

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Article V

The effective date for this Limited Liability Company shall be:

06/08/2019

Signature of member or an authorized representative

Electronic Signature: MCKENZIE SYLVESTRE

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.