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LAZARUS CORPORATE

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5/24/2019 16:12 3052201440 LAZARUS CORPORATE ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is:	AGE 2019 JUN 24 AM 10: SECRETARY OF STA TALLAHASSEE. FLOR	
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:		
FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:		
FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:		
ARTICLE I - Name:		
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MY COOL MARKET L'LC	LORIDA STATE STATE	_ _
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Company is:	l Liability	
10020 NW 86 TERRACE DOLAL F	-[33	<u>,17</u> 8
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: The Limic Company cannot serve as its own Registered Agent. You must designate an individual or another business with an active Florida registration.) BORIS G. DURAN	nited Liability ss entity	
10020 NW 86 TERRACE DOCAL, FL	331-	78
ARTICLE IV The name and title of each person authorized to manage and control the Liability Company: (MGR or AMBR)		
BORIS A. DULTING (MILIN	-	
BORIS G. DURAN (AMBR) ALEJANDRO ANTONIO PEREZ M	TUKHI	<u> </u>
(AMBR)		

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Required Signatures:

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 peoalties 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 695, F.S. Registered Agent's Signature (REQUIRED)