Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000320870 3)))



H190003208703ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

Division of Cor			
DTATOTION OF COL	porations	<u> </u>	9
Fax <b>Numbe</b> r	: (850)617-6381		9
			73
Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	ψ <sub>2</sub> ,	õ
Account Number	: I2 <del>000</del> 0000019	[ ]	_
Phone	: (305)552-5973		₽
Fax Number			=
		$\odot$	••
		<u></u>	_
the email address	s for this business entity to be used for	future	9
ual report maili	ngs. Enter only one email address please.	**	
il Address:		_	
	Account Name Account Number Phone Fax Number the email address	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944  the email address for this business entity to be used for the point mailings. Enter only one email address please.	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944  the email address for this business entity to be used for future

## FLORIDA LIMITED LIABILITY CO. GOOD FELLA'S INVESTMENT GROUP LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 31 2019

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

The name of the Limited Liability Company is:				
Good Fella'S Investment Group FLC	<b>_</b>			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
164705W55terr Krami. FL 33189				
	_			
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 husiness entity with an active Florida registration.)	<b></b> -			
Felix Rodriguez				
Felix Rodriguez 16470 SW 55 TERR.	_			
MIANI, FZ. 33185.	_			
ARTICLE IV  The name and title of each person authorized to manage and control the Limited  Liability Company: (MGR or AMBR)				
Felix Modriquez (MGR)				
OCI				
SS: 0 SE: 0	<del></del>			
Page 1	<del>] -</del> ;			

## 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 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)

19 OCT 30 PHII: 20