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.

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To:		-
	Division of Corporations	$\stackrel{i}{\sim}\stackrel{i}{\sim}\stackrel{\omega}{\omega}$
	Fax Number : (859)617-6381	
From:		
	Account Name : LAZARUS CORPORATE FILING SERVICE,	INC.
	Account Number : I2 00080000 19 Phone : (305)552-5973	
	Phone : (305)552-5973 Fax Number : (305)675-5944	
an	the email address for this business entity to be use nual report mailings. Enter only one email address plaid Address:	lease.** S TALLEN
		NOV 0.5 2019

FLORIDA LIMITED LIABILITY CO. FLORIDA CAPITAL LIVING LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company,
"L.L.C.," or "LLC.")
Florida Capital Living LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability
Company is: 14247 SW 42 Nd ST, Miami FL
33175
ARTICLE III - Registered Agent, Registered Office:
The name and the Florida street address of the registered agent are: (11:e Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
Alyaidee Carreño Delgado 14247 SW 42Nd ST, Miami FL
33175
ARTICLE IV-
The name and title of each person authorized to manage and control the Limited Liability Company:
(AMBR)
(AMBR)
2019 KOV
· P

Required Signatures:

3052201440

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.3.

Alyaidee Carreno Delgado
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 (REOUIRED)