

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

L19000296783  
FILED 8:00 AM  
December 13, 2019  
Sec. Of State  
nculligan

**Article I**

The name of the Limited Liability Company is:

ALEXIS AID LLC.

**Article II**

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

231 SOUTH STATE RD 7  
PLANTATION, FL. US 33317

The mailing address of the Limited Liability Company is:

PO BOX 120982  
FORT LAUDERDALE, FL. US 33312

**Article III**

Other provisions, if any:

TO EFFECTIVELY AND PROFESSIONALLY EMPOWER THOSE WHO WANT A  
PLACE TO START THEIR DREAM.

**Article IV**

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

SOPHIA ALEXIS MRS.  
231 SOUTH STATE ROAD 7  
PLANTATION, FL. 33317

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: SOPHIA K. ALEXIS

## **Article V**

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

Title: MGR  
SOPHIA K ALEXIS  
231 SOUTH STATE ROAD 7  
PLANTATION, FL. 33317 US

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Signature of member or an authorized representative

Electronic Signature: SOPHIA K. ALEXIS

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.

# L190002 96783

FROM: SOPHIA K. ALEXIS  
PO BOX 120982  
FORT LAUDERDALE FLORIDA 33312

2019 DEC 13 PM 1:54

TO: Florida Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303.

December 10, 2019

RE: Letter Number: 191203121243-000336979960

## Affidavit

Before me the undersigned authority, has appeared SOPHIA K. ALEXIS, to me well known and known to me to be the person who after being duly identified, deposes, and has executed the following Affidavit:

My name is Sophia Kenny Alexis I am the owner of ALEXIS AID INC filed on May 5, 2017 under document number N17000004956. My Florida ID is A422-791-85-637-1 and my date of birth is April 17, 1985 I and the board filed a Voluntary dissolution on October 4, 2019 with the state.

I am now filing the business under LLC formation instead of ALEXIS AID INC. nonprofit I am requesting ALEXIS AID LLC. Limited liability for profit business tax ID will remain the same as requested already 82-1507910.

**I have no intention of revoking the dissolution, therefore, I am releasing the name for use to another entity. Please file the requested document.**

**Document Number: W19000103646**

**Entity Name: ALEXIS AID LLC.**

**Tracking Number: 000336979960**

Sincerely,

Sophia K. Alexis

Owner/Authorized Representative.



Stephanie Blanco  
State of Florida

My Commission Expires 05/21/2022  
Commission No. GG 220552

Furthermore, sayeth naught.

Executed this day December 10, 2019

Sworn to and acknowledged before me this 10 day of December 2019.

Sophia K. Alexis

Notary Public