

**L20000003553**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: CPATIG@AOL.COM

**FLORIDA LIMITED LIABILITY CO.  
RESPONSIBLY RECKLESS LLC**

Certificate of Status	1
Certified Copy	0
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2020 JAN -6 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS  
SUPERVISOR OF COMMERCIAL  
INFORMATION SERVICES

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

**RESPONSIBLY RECKLESS LLC**

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:****Mailing Address:**1008 BEL AIR DRIVE  
HIGHLAND BEACH, FL 334871008 BEL AIR DRIVE  
HIGHLAND BEACH, FL 33487**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

MASSIMO DEBELLO

Name

1008 BEL AIR DRIVEFlorida street address (P.O. Box **NOT** acceptable)HIGHLAND BEACH

City

FL 33487

Zip

*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)

**MASSIMO DEBELLO**

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager


AMBRAMBR**Name and Address:**MASSIMO DEBELLO1008 BEL AIR DRIVEHIGHLAND BEACH, FL 33487GIANCARLO DEBELLO1008 BEL AIR DRIVEHIGHLAND BEACH, FL 33487

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
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.)

MASSIMO DEBELLO

Typed or printed name of signer

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