Ort Dear head one of Division of Corporations Electronic Filing Cover Sheet

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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	Doing so will generate another cover sheet.	<u>P</u> s:	2020
To:		T P P E	B33 l
	Division of Corporations	25	8
	Fax Number : (850)617-6381	SSE YSSE	‡
From:		mo	
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	<u> S</u>	À
	Account Number : I20000000019	TATE ORIO	ð: Ot
	Phone : (305)552-5973 Fax Number : (305)675-5944	55	1
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อกเ	the email address for this business entity to be used for future nual report mailings. Enter only one email address please.** all Address: FLORIDA LIMITED LIABILITY CO. REDSKY RENTALS LLC Certificate of Status 1 Certified Copy 0	7-01,101-4	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Redsky Rentals LIC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
15483 Sw 102 CT Miani, FL 32157
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 business entity with an active Florida registration.)
Saimel Buiz
15483 SW 102 CT
MiAmi PC 33157
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
SAIMEL RUIZ (AMBR)
SSEE F
STATE ORIGA

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)

2020 FEB -4 AM 9: 04
SECRETARY OF STATE
TALLAHASSEE