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.

(((H20000048994 3)))



H200000489943ABC3

 	Doing so will gen	erate another cove	r sheet.		L A	2020 FEB 12
To:					ASS	8
	Division of Corporations				D1:-:	
	Fax Number : (850)617-6381				n	2
From:						PK 3: 22
		S CORPORATE FILIN	G SERVICE, INC	•		7
	Account Number : I200000 Phone : (305)5				\triangleright	1
	Fax Number : (305)6					
	FLORIDA LIMI		ry co.		2020 FEB 12 P	FOR
	FMI	FINETIC				<
		FINE LLC		100 A	PH -	N N
	Certificate of Status	FINE LLC	1	CKATION MERCIAL	 	SIVED
	Certificate of Status Certified Copy	FINE LLC	1	CHATIONS MERCIAL PROPERTY		VED
	Certificate of Status	FINE LLC	0 03	CRATIONS PERCIAL PRYICES	<u>∓</u>	VED



ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

PAGE 02/03

P K
3: 22

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.

Having been named as registered agent and to accept service of process for the above stated.

Having been named as registered agent and to accept service of process for the above stated. limited liab lity company at the place designated in this certificate, I hereby accept the appointment as egistered 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)