

L200000152942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

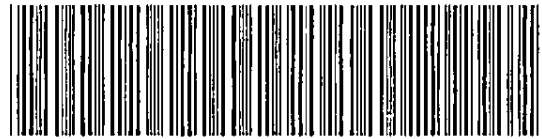
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600345607266

06/09/20--01023--019 \*\*125.00

2020 JUN -9 PM 2:08

2020 JUN -9 PM 12:28  
FILED  
TALLMAN

7 10 2020

rumpley

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FUJI CAPITAL LLC

Signature \_\_\_\_\_

Requested by: Seth

06/08/20

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

172 Pender's Printing • Tallahassee, GA 32301

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR  
FUJI CAPITAL LLC**

**ARTICLE I – NAME:**

The name of the Limited Liability Company is: FUJI CAPITAL LLC.

**ARTICLE II – ADDRESS:**

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

Principal Office Address:

7355 SW 87<sup>th</sup> Avenue  
Suite 200  
Miami, FL 33173

Mailing Address:

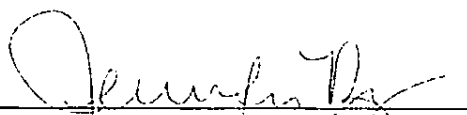
c/o Ruz & Ruz PL / JR  
7355 SW 87<sup>th</sup> Avenue, Suite 200  
Miami, FL 33173

**ARTICLE III – REGISTERED AGENT:**

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

Ruz & Ruz PL  
7355 SW 87 Ave  
Suite 200  
Miami, FL 33173

*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

FILED  
2020 JUN -9 PM 12: 20  
TALLAHASSEE, FL

**ARTICLE IV – AUTHORIZED PERSONS:**

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

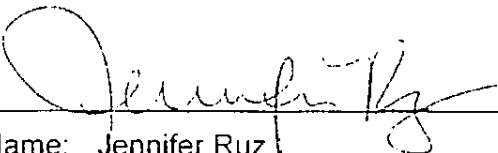
<u>Title</u>	<u>Name &amp; Address</u>
MGR	Jorge Ahumada 7355 SW 87th Avenue Suite 200 Miami, FL 33173

**ARTICLE V – EFFECTIVE DATE:**

The effective date of these Articles of Organization is the date of filing.

**REQUIRED SIGNATURE:**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

  
Name: Jennifer Ruz