

# L20000198327

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

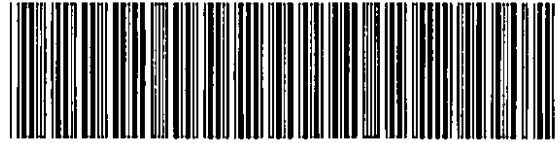
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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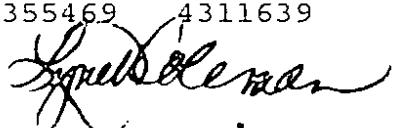
JUL 20 2020

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 355469 4311639

AUTHORIZATION :



COST LIMIT : \$ 155.00

ORDER DATE : July 14, 2020

ORDER TIME : 8:04 AM

ORDER NO. : 355469-005

CUSTOMER NO: 4311639

DOMESTIC FILING

NAME: HIVE HIGHLY INNOVATIVE VALUE  
ENHANCERS, LLC

EFFECTIVE DATE:

\_\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX\_\_\_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX\_\_\_\_\_ CERTIFIED COPY  
\_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT. 62980

EXAMINER'S INITIALS: \_\_\_\_\_

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TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION**

**OF**

**HIVE HIGHLY INNOVATIVE VALUE ENHANCERS, LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is:

**HIVE HIGHLY INNOVATIVE VALUE ENHANCERS, LLC**

**ARTICLE II: - Address**

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

18151 N.E. 31<sup>ST</sup> CT., APT. 1509  
Aventura, FL 33160

**ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature**

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

Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301

*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.*

Corporation Service Company, Registered Agent

By: 

Name: KADESHA ROBERSON

Title: ASST. VICE PRESIDENT

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TALLAHASSEE, FL

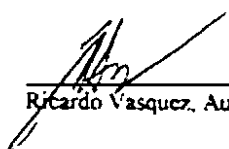
**ARTICLE IV: - Management**

The name and address of the initial Manager authorized to manage and control the Limited Liability Company is:

Title  
MGR/D

Name and Address  
Ricardo Vasquez  
18151 NE 31<sup>ST</sup> CT., APT. 1509  
Aventura, FL 33160

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on July 14, 2020.

  
\_\_\_\_\_  
Ricardo Vasquez, Authorized Signer

(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 Section 817.155, Florida Statutes.)

Ricardo Vasquez  
\_\_\_\_\_  
Typed or printed name of signer