L20000200488

(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



000347956660

07/21/20--01601---089

SECRETARY OF STATE



N CHILLS :

CORPORATE WA

When you need ACCESS to the world

/	25
1	

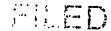
INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

WALKIN			
	PICK U	JP: <u>7/20 Glinda</u>	
	CERTIFIED COPY		
хх	РНОТОСОРУ		
	CUS		
хх	FILING	LLC	
1.	3 KINGS MOVING LLC (CORPORATE NAME AND DOCUMEN	VT #)	
2.	(CORPORATE NAME AND DOCUMEN	VT #)	
3.	(CORPORATE NAME AND DOCUMEN	VT #)	
4.	(CORPORATE NAME AND DOCUMEN	TT#)	
5.	(CORPORATE NAME AND DOCUMEN	IT#)	
6.	(CORPORATE NAME AND DOCUMEN	TT#)	
SPECIA	AL INSTRUCTIONS:		



2820 JUL 20 AM 10: 14

SECRETARY OF STATE TALLAHASSEE, FL

ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

3 KINGS MOVING LLC

ARTICLE II.

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

5531 NW 72ND Avenue

MIAMI FL 33165

The mailing address of the Limited Liability Company is:

1016 NE 1015 Street Unit #1

Hallandale Beach FL 33009

ARTICLE III.

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

ARTICLE IV.

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

Robert Fodor

1016 NE 10th Street Apt. #1

Hallandale Beach FL 33009

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.

Robert Fodor

7/14/2020

Registered Agent's Signature

Date:

ARTICLE V.

The name and address of each Manager or Managing Member is as follows.

Name and Address.

Title, MGR

FODOR, ROBERT

1016 NE 10th Street Apt. 1

Hallandale Beach FL 33009

Robert Footor

BERES, EVA

1016 NE 1014 Street Apt. 1

Hallandale Beach, Ft. 33009

Eux Boses

FODOR, PATRIK

1016 NE 10TH Street Apt. 1

Hallandale Beach FL 33009

O JUL 20 AM IO: 14 ECRETARY OF STAT TALLAHVASSEE, FL

Patrib Factor

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. If 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.

Robert Fodor

Signature of a member or an authorized representative of a member.

ROBERT FODOR

7/14/2020

Typed or printed name of signee

Dote