

L20000205758

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(City/State/Zip/Phone #)

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(Document Number)

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LLC

1. SIGHTSEE LLC

(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I.

The name of the Limited Liability Company is:

**SIGHTSEE LLC**

## ARTICLE II.

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

6570 SW 13<sup>TH</sup> Street

Plantation FL 33317

The mailing address of the Limited Liability Company is:

6570 SW 13<sup>TH</sup> Street

Plantation FL 33317

## 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:

PASZTOR, SZILVIA

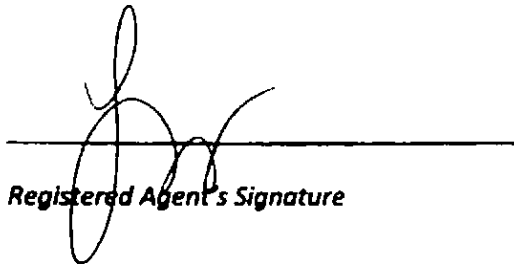
6570 SW 13<sup>TH</sup> Street

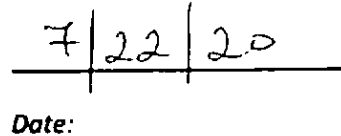
Plantation FL 33317

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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

  
Date:

## ARTICLE V.

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

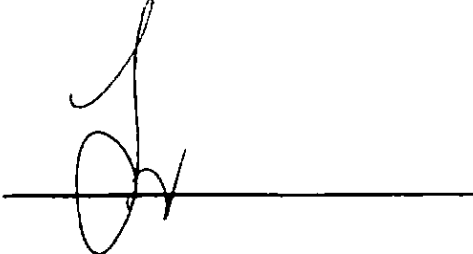
Name and Address:

Title: MGR

PASZTOR, SZILVIA

6570 SW 13<sup>th</sup> Street

Plantation FL 33317

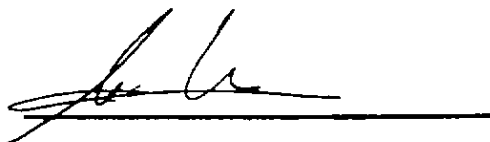


SIMANDI, LEVENTE

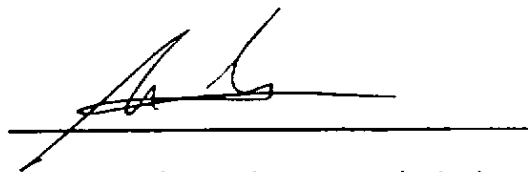
Title: MGR

6570 SW 13<sup>TH</sup> Street

Plantation FL 33317



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.



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

LEVENTE SIMANDI

*Typed or printed name of signee*

7/22/20

*Date*