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· (Re	questor's Name)	
(Ad	dress)	
——————————————————————————————————————	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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ELECTION OF STATE

COVER LETTER.

то:	New Filing Sec Division of Co					
SUBJE		use 3, LLC.				
SOBJE.		Name	of Lim	ited Liabili	ty Company	
The enc	dosed Articles of	Organization and fe	e(s) are	submitted	for filing.	
Please i	return all corresp	ondence concerning	his ma	tter to the f	ollowing:	
	Barry M. Sie	ckles, Sq.				
				Name of	Person	
	Law Office	of Barry M. Sickles,	PA			
		<u>,, ,</u> ,		Firm/Co	mpany	
	4662 Coral	Ridge Drive				
,				Addr	288	
•	Coral Spring	şs. Florida 33076				
	Barry@Sickle	eslaw.com	Ci	ity/State an	d Zip Code	
		E-mail address; (to b	e used	for future a	nnual report notificat	ion)
For furth	er information co	ncerning this matter,	please	call:		
	Barry M. Slo	kles, Esq.	95 at (255 7360	
	Nan	ie of Person		rea Code	Daytime Telephon	e Number
Enclose	ed is a check for t	he following amount	:			
■\$125	6.00 Filing Fee	□\$130.00 Filing Certificate of Stat		Certific	5,00 Filing Fee & ed Copy al copy is enclosed)	☐S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address			Street Address New Filing Section Di	ivisium

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	contain the words "Limited Lia	bility Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and str	eet address of the principal offi	ce of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
	266 Pine Avenue		266 Pine Avenue	
Lauderdale By T	The Sea, FLorida 33308	Laud	erdale By The Sea, Florida 33308	
The Limited Liability Commother business entity with	h an active Florida registration. Treet address of the registered a	egistered Agent, Y	et's Signature: Fou must designate an individual or	
(The Limited Liability Com another business entity with	pany cannot serve as its own Roh an active Florida registration. Treet address of the registered at Barry M. Slekles, Esq.	egistered Agent, Y		
The Limited Liability Com another business entity with	pany cannot serve as its own Roh an active Florida registration. Treet address of the registered at Barry M. Slekles, Esq.	egistered Agent, Y gent are: Vame		
(The Limited Liability Com another business entity with	pany cannot serve as its own Roh an active Florida registration. treet address of the registered ap Barry M. Slekles, Esq.	egistered Agent, Y gent are: Name	ou must designate an individual or	
The Limited Liability Com another business entity with	pany cannot serve as its own Roh an active Florida registration. Barry M. Slekles, Esq. 4662 Coral Ridge Drive	egistered Agent, Y gent are: Name	ou must designate an individual or	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

2020 JUL 14 PM 2:53

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Mem "MGR" = Manager	ber
MGR - Manager	BERND KAMMERER
BION.	266 PINE AVENUE
	LAUDERDALE BY THE SEA, FLORIDA 33308
MGR	HANIA MAMAUDUD
WER	HANA KAMMERER 266 PINE AVENUE
	LAUDERDALE BY THE SEA, FLORIDA 33308
	
	
he date of filing.)	must be specific and cannot be more than five business days prior to or 90 days after does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
RTICLE VI: Other provisions, if any,	
REQUIRED SIGNATURE:	ure of a member or an authorized representative of a member.
 	Note the second
Simula	ure of a member or an authorized representative of a member.
This docume	nt is executed in accordance with section 605,0203 (1) (b), Florida Statutes.
I am awage th	nat any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.
	BERNO KAMMERER
	Typed or printed name of signee

Filing Fees;

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)