

L2000022847

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000257839 3)))



H200002578393ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

2020 AUG -3 PM 4:04

CORPORATIONS
DIVISION OF
COMMERCIAL
REGISTRATION SERVICES

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
Fax Number : (516)935-3088

STATE OF FLORIDA
TALLAHASSEE, FL 32309

20 AUG -3 PM 6:07

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jean98L@gmail.com

FLORIDA LIMITED LIABILITY CO. SIZONNEN LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2020 AUG -3 PM 7:57

H20000257839 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SIZONNEN LLC

(Must end with the words "Limited Liability Company, "L.L.C." or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:1431 NW 173RD TER
MIAMI GARDENS, FL 33169-5120**Mailing Address:**1431 NW 173RD TER
MIAMI GARDENS, FL 33169-5120**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JEAN LOUIS FILTIDOR

Name

1431 NW 173RD TERFlorida street address (P.O. Box **NOT** acceptable)MIAMI GARDENSFL 33169-5120

City

Zip

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 (REQUIRED)

JEAN LOUIS FILTIDOR

(CONTINUED)

H20000257839 3

H20000257839 3

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

JEAN LOUIS FILTIDOR

1431 NW 173RD TER

MIAMI GARDENS, FL 33169-5120

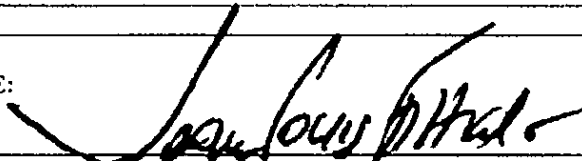
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

(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.)

JEAN LOUIS FILTIDOR

Typed or printed name of signee

FILED
20 AUG -3 PM 6:07
TALLAHASSEE, FL 32301

H20000257839 3