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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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2020 AUG -6 PM 3:45

CORPORATIONS
COMMERCIAL
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FLORIDA LIMITED LIABILITY CO. THE FLAME: ENTERTAINMENT & SPORTS, LLC

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

J. FASON

AUG 07 2020

2020 AUG -6 PM 2:00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE FLAME: ENTERTAINMENT & SPORTS, LLC

(Must contain 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:

Mailing Address:

15720 TURNBERRY DRIVE

SAME

LOCH LOMOND

MIAMI LAKES, FL 33014

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:

ROBERTO ANTONIO CAO

Name

15720 TURNBERRY DR. LOCH LOMOND

Florida street address (P.O. Box ~~NOT~~ acceptable)

MIAMI LAKES FL 33014

City

State

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.

Roberto Cao

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

ROBERTO ANTONIO CAO

15720 TURNBERRY DR. LOCH LOMOND
MIAMI LAKES, FL 33014

AMBR

BRANDON LEE QUINONES

15720 TURNBERRY DR. LOCH LOMOND
MIAMI LAKES, FL 33014

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

ROBERTO ANTONIO CAO

Typed or printed name of signer

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