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.

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	so will generate another cover sheet.	<u>5</u> 8-	2020
го:	Division of Corporations Fax Number : (850)617-6381	CRL TART LAHASSE	2020 AUS 19
PM 4:50	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944	OF STATE E. FLORIDA	AM 9: 53
**En	ter the email address for this business entity to be used for f annual report mailings. Enter only one email address please.*	uture *	
	Email Address:	_	

## FLORIDA LIMITED LIABILITY CO. SERENE SERENITY LLC

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "L.L.C." or "LLC.")

SERENE SERENITY LLC

TILED 2020 AUS 19 AM 9: 5 SECRETANT OF STATE TALLAHASSEE, FLORE

#### **ARTICLE II - Address:**

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

2864 NW 132ND ST #1233

OPA LOCKA, FL. 33054

## ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot scrue as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

LISA BRYANT 2864 NW 132<sup>ND</sup> ST #1233 OPA LOCKA, FL. 33054

#### **ARTICLE IV-**

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

LISA BRYANT- MNGR

### Required Signatures:

Signature of a member 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.

LISA BRYANT

Typed or printed name of signee

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)