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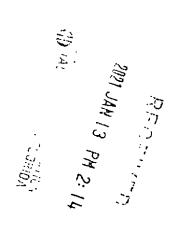
(Requestor's Name)
(Address)
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(C. (C (7) JD)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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1/13/2021

NAME: POWER OF INTENTION LLC

TYPE OF FILING: ARTICLES

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RETURN: PLAIN COPY AND GOOD STANDING PLEASE

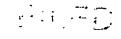
ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Chhie Hodge

### **COVER LETTER**

	v ruing Sec ision of Cor						
SUBJECT:	Power of la	ntention LLC					
SUDJECT:		Nam	e of Limite	d Liabilit	y Company		
The enclosed	l Articles of	Organization and f	ee(s) are su	bmitted (	or filing.		
Please return	all correspo	ondence concerning	g this matter	to the fo	llowing:		
,	William Dor	nato					
_				Same of I	Person		
<del>-</del>			<del></del> .	7' (6)			
			ł	Firm/Con	ıpany		
:	5532 Fox Ho	ollow Drive					
				Addre	SS		
_	Boca Raton,	Florida 33486					
hi	ill@donato.a	i	City/	State and	Zip Code		
			be used for	future ar	nual report notificati	on)	
For further inf	ormation co	neerning this matte	r, please cal	11:			
Α	Anibal Manzano		561 _at (	,	440-8242		
_	Nam	e of Person	Area		Daytime Telephone		
Enclosed is a	check for t	ne following amou	nt:				
□\$125.00 F	iling Fee	■\$130.00 Filing Certificate of St	atus	Certifie	.00 Filing Fee & d Copy l copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
		g Address			Street Address New Filing Section		
New Filing Section Division of Corporations P.O. Box 6327 Tallabassee, FL 37314				Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301



2021 JAN 13 PM 12: 21

# ARTICLES OF ORGANIZATION OF POWER OF INTENTION LLC

## SECRETATIV OF STATE TALLAHASSEE, FL

### **ARTICLE I - NAME**

The name of the limited liability company is POWER OF INTENTION LLC (the "Company").

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Company is 5532 Fox Hollow Dr, Boca Raton, Florida 33486.

#### ARTICLE III - REGISTERED AGENT AND OFFICE

The street address of the Company's initial registered office is 5532 Fox Hollow Dr, Boca Raton, Florida 33486, and the name of its initial registered agent at such office is William Donato.

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..

Name: William Donato

### **ARTICLE IV - AUTHORIZED PARTIES**

The names and addresses of each person authorized to manage and control the Company are set forth below.

<u>Title</u>	Name & Address
Manager	William Donato 5532 Fox Hollow Dr, Boca Raton, Florida 33486
Manager	Perla Donato 5532 Fox Hollow Dr. Boca Raton, Florida 33486

In accordance with Section 605.0203(1)(b) of the Florida Revised Limited Liability Company Act, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Executed on January 13, 2021.

William Donato Authorized Representative