

1/29/2021

Kim Tadlock 8004323622

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Division of Corporations

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
L3 E3 ENTERPRISES, LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION

FOR

L3 E3 ENTERPRISES, LLC

ARTICLE - NAME:

The name of this Limited Liability Company ("Company") shall be:

L3 E3 ENTERPRISES, LLC

ARTICLE - ADDRESS

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

1011 Sunnybrook Rd, Suite 905, Miami, Florida 33136.

ARTICLE - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to law.

ARTICLE - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such managers is:

Luis Garcia
1011 Sunnybrook Road, Suite 905
Miami, Florida 33136

ARTICLE - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

ARTICLE - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continual membership of a member in the Company shall be: determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name.


Luis Garcia, Manager

Signature of a member or an authorized representative of a member
(In accordance with section 605, Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT
TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF
FLORIDA.

1. THE NAME OF THE LIMITED LIABILITY COMPANY IS:

L3 E3 ENTERPRISES, LLC

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

Luis Garcia
1011 Sunnybrook Road, Suite 905
Miami, Florida 33136

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.



Luis Garcia

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