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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Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC. Account Number : 075350000353 Phone : (800)221-2972 Fax Number : (917)243-5843 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address: FLORIDA LIMITED LIABILITY CO.	To:	Division of C Fax Number	orporations : (850)617-6381			ABCUT OF	E8 26 AM
annual report mailings. Enter only one email address please.** Email Address: FLORIDA LIMITED LIABILITY CO.		Account Numbe Phone	r : 075350000353 : (800)221-2972	SIOR CORPORAT	E SERVICES	s, INCE	0.4:8
FLORIDA LIMITED LIABILITY CO.							
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Electronic Filing Menu

Corporate Filing Menu

Help

of the

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	L LLC			·		
(Must end	with the words "Limited	Liability Comp	pany, "L.L.C.," or "LLC.")			
ARTICLE II - Address; The mailing address and street	address of the principal of	ffice of the Lim	ited Liability Company is:			
Princi	pal Office Address:		Mailing Address:			
265 S Federal Hwy Deerfield Beach, FI			265 S Federal Hwy Suite 291 Deerfield Beach, FL 33441			
isotifica south, 12			Secricia Descri, 1 E 35441			
another business entity with an The name and the Florida street	active Florida registratio	n.)	nt. You must designate an individ		2021 FEB 26	***
		Name		<u> </u>	I.	i
	265 S Federal Hwy S	uite 291		<u>~</u> ;3′	ထု	(_
	Florida street address	s (P.O. Box <u>NO</u>	T acceptable)	, 5=	<u>-</u>	
	Deerfield Beach	FL_	33441			
	City	State	Zip			
Having been named as registered	e, I hereby accept the appo provisions of all statutes re	intment as regi. lating to the pro	the above stated limited liability of stered agent and agree to act in thi per and complete performance of ent as provided for in Chapter 605	s capacity. I mv duties, and I		

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Nedzat Arap
	265 S Federal Hwy Suite 291
	Deerfield Beach, FL 33441
	Šv.
MGR	Vincent Vennera
	265 S Federal Hwy Suite 291
	Deerfield Beach, FL 33441
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(Use attachment if necessary) LEV: Effective date, if other than the	date of filing: (OPTIONAL)
LE V: Effective date, if other than the offective date is listed, the date must be of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 96 not meet the applicable statutory filing requirements, this date will no ent of State's records.
LE V: Effective date, if other than the refective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Departm LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is ex I am aware that any	e specific and cannot be more than five business days prior to or 90 to meet the applicable statutory filing requirements, this date will no ent of State's records.
LE V: Effective date, if other than the refertive date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Departm LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is ex I am aware that any	e specific and cannot be more than five business days prior to or 96 not meet the applicable statutory filing requirements, this date will not ent of State's records. Luct Vennera member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State