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## **COVER LETTER**

TO: **New Filing Section Division of Corporations** 

# **AAA Life Style International LLC**

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please retu	rn all correspo	ondence concerning t	his matter to the	following:	
	Filing Do	epartment			
			Name o	f Person	
	Incorpo	rate Now Inc			
			Firm/C	отралу	
	512 Luc	erne Ave.			
			Add	ress	
	Lake W	orth, FL 33460			
	corp@in	corporatenow	•	nd Zip Code	-
•	<del></del>			annual report notificat	ion)
For further i	nformation co	ncerning this matter,	please call:		
	Filing D	epartment	at ( 800	371-1217	
	Nam	e of Person	Area Code	Daytime Telephor	ne Number
Enclosed is	s a check for t	he following amount:	:		
<b>\$</b> 0\$125.00	Filing Fee	□\$130.00 Filing I Certificate of State	us Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

## **Mailing Address**

New Filing Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

## Street Address

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

# **AAA** Life Style International 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 A	ddress:
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**Mailing Address:** 

512 Lucerne Ave., Suite 167

Lake Worth, FL 33460

512 Lucerne Ave., Suite 167 Lake Worth, FL 33460

#### 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:

Incorporate i	Now	Inc
---------------	-----	-----

Name

512 Lucerne Ave.

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

 Lake Worth
 FL
 33460

 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager MGR Roman Pash 512 Lucerne Ave., Suite 167 Lake Worth, FL 33460 MGR Maryna Pash 512 Luceme Ave., Suite 167 Lake Worth, FL 33460 (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:** /Roman Pash/ 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.

Filing Fees:

Roman Pash

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)