

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L21000118797
FILED 8:00 AM
January 29, 2021
Sec. Of State
tburch

Article I

The name of the Limited Liability Company is:

MESIDOR INSURANCE & FINANCE CONSULTANT LLC

Article II

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

406 SW 77TH AVE
NORTH LAUDERDALE, FL. UN 33068

The mailing address of the Limited Liability Company is:

406 SW 77TH AVE
NORTH LAUDERDALE, FL. UN 33068

Article III

The name and Florida street address of the registered agent is:

STEPHANE MESIDOR
406 SW 77TH AVE
NORTH LAUDERDALE, FL. 33068

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.

Registered Agent Signature: STEPHANE MESIDOR

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
STEPHANE MESIDOR
406 SW 77TH AVE
NORTH LAUDERDALE, FL. 33068 UN

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Article V

The effective date for this Limited Liability Company shall be:

01/28/2021

Signature of member or an authorized representative

Electronic Signature: STEPHANE MESIDOR

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

21000118797

Affidavit

STATE OF FLORIDA
COUNTY OF BROWARD

The undersigned, STEPHANE MESIDOR, being first duly sworn, do hereby state under oath and under penalty of perjury that the following facts are true:

1. I am over the age of 18 and am a resident of the State of Florida. I have personal knowledge of the facts herein, and, if called as a witness, could testify completely thereto.
2. I suffer no legal disabilities and have personal knowledge of the facts set forth below.
3. I, Stephane Mesidor managing member and officer of Mesidor Insurance & Finance Consultant INC, have no intent of reinstating Mesidor Insurance & Finance Consultant INC, therefore, releasing the name for use to another entity.

I declare that, to the best of my knowledge and belief, the information herein is true, correct, and complete.

Executed this 16 day of March, 2021.

Stephane Mesidor
STEPHANE MESIDOR

NOTARY ACKNOWLEDGMENT

STATE OF FLORIDA, COUNTY OF BROWARD, ss:

The foregoing Affidavit was acknowledged before me, by means of ☒ physical presence or ☐ online notarization, this 16th day of March, 2021 by STEPHANE MESIDOR, who is personally known to me or who has produced FL/DL (Temp) as identification, and being first duly sworn on oath according to law, deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the matters stated herein are true to the best of his/her information, knowledge and belief.



A handwritten signature in cursive script, appearing to read 'Danielle G Webb', written over a horizontal line.

Signature of person taking acknowledgment

Name typed, printed, or stamped

Title or rank

Serial number (if applicable)