Division of Corporations

# Florida Denartment

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To:

Division of Corporations

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Fax Number : (850)517-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 : (305)444-4994 Fax Number : (305)444-4977

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# FLORIDA LIMITED LIABILITY CO. MALAGMA LLC

Certificate of Status	0
Certified Copy	1
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(3)

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Corporate Filing Menu

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From: Yanet Avila

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2021-04-12 20:12:44 GMT

## ARTICLE I - Name: The name of the Limited Liability Company is: MALAGMA 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 Address: Mailing Address: 20 ISLAND AVE APT # 1102 SAME MIAMI BEACH, FL 33139

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:

PREFERRED A	Name Name	ES. INC.
7440 SW 50 TER	SUTTE 106	
Florida street ad	dress (P.O. Box <u>NOT</u> a	cceptable)
MIAMI	FL	33155
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. Thereby 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 regulared gazent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	11	Ю	 IV.

The name and address	of teach nerson a	uthorized to monas	e and control the	Limited Liabilit	v Commany:

Title:	Same and Address:
"AMBR" = Authorized Member "MGR" = Manager	
<del>-</del>	NATION OF THE WASTERN
AMBR	MARCELO PABLO TASSITCH 20 ISLAND AVE APT # 1102
	MIAMI BEACH, FL 33139
AMBR	ANA LAURA PALMUCCI 20 ISLAND AVE APT # 1192
	MIAMI BEACH, FL 33139
(Use attachment if necessary)	
ARTICLE V: Effective date if other than the	date of filing:
If an effective date is listed, the date must be	e specific and cannot be more than five business days prior to or 90 days after
he date of filing.)	
Note: If the date inserted in this block does the document's effective date on the Departn	not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departs	ient in state specials.
ARTICLE VI: Other provisions, if any.	
	1 11
REQUIRED SIGNATURE:	
	a member or an authorized representative of a member.
	Recuted in accordance with section 605.0203 (1) (b), Florida Statutes.  Talks: information submitted in a document to the Department of State.
	egree felony as provided for in s.817/155, F.S.

### MARCIELO PABLO TASSITCH

Typed or printed name of signee

### Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 38.00 Certified Copy (Optional)
- 5 5.00 Certificate of Status (Optional)

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