

6/19/2021

# L21000289318

Division of Corporations

Florida Department of State  
Division of Corporations  
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To:

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Account Name : INGRID M. BACHELOR C.P.A.  
Account Number : I20000000120  
Phone : (954)752-2758  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ingrid@bachelorandassociates.com

**FLORIDA LIMITED LIABILITY CO.**  
**Folakasimani Investments, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

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**ARTICLES OF ORGANIZATION  
OF  
Folakasimani Investments, LLC.**

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

**ARTICLE I**

**NAME**

The name of this limited liability company is:

**Folakasimani Investments, LLC.**

**ARTICLE II  
PRINCIPAL OFFICE/MAILING ADDRESS**

The principal office and mailing address of this limited liability company is:


7531 Via Luria  
Lake Worth, Florida 33467

**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED  
AGENT'S SIGNATURE**

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

Dwight Davis  
7531 Via Luria  
Lake Worth, Florida 33467

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.

  
Dwight Davis, Registered Agent

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**ARTICLE IV  
MANAGEMENT**

The limited liability company is to be managed by its members and is, therefore, a member-managed company. The name and address of each Manager or Managing Member is as Follows:

Dwight Davis  
7531 Via Luria,  
Lake Worth, FL 33467

Manager

Charmaine Davis  
7531 Via Luria,  
Lake Worth, FL 33467

Authorized Member



Dwight Davis, Authorized Representative of  
the Member

(In accordance with Section 605.0203(1)(b) Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. 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.)

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