## L21000371698

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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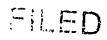
CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

There. 330 330 1300
ACCOUNT NO. : 12000000195
REFERENCE: 967121 7977112
AUTHORIZATION : Lovelle Roman
COST LIMIT : \$ 130.00
ORDER DATE : August 18, 2021
ORDER TIME : 10:22 AM
ORDER NO. : 967121-005
CUSTOMER NO: 7977112
DOMESTIC FILING
NAME: PROVIOS, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

## COVER LETTER

	New Filing Sec Division of Cor				
elin ir.	PROVIOS.				
SUBJEC	T:	Name	of Limited Liab	pility Company	
The encl	osed Articles of	Organization and fe	e(s) are submitte	ed for filing.	
Please re	turn all correspo	ondence concerning	this matter to the	e following:	
	Samuel F. C	olburn, Esq.			
	<del></del>	<del></del>	Name	of Person	
	Woods, Wei	denmiller, Michetti	& Rudnick, LL	Р	
		_ <del>_</del>	Firm/0	Company	
	9045 Strada	Stell Court, Suite 40	)0		
			Ad	dress	
	Naples, FL 3	34109			
			City/State	and Zip Code	
	Mike@danilo		a used for futur	e annual report notificat	ion)
For furthe		ncerning this matter		C tallitudi report noticioni	
	Samuel Colb		239 _at (	325-4070	
	Nan	ne of Person	Area Code	Daytime Telephon	e Number
		L. C. Harrian amana	<b>.</b> .		
		he following amoun		ies oo rillaa Faa 9.	□\$160.00 Filing Fee.
<b>□\$12</b> 5.	00 Filing Fee	E\$130.00 Filing Certificate of Sta	itus Cert	155.00 Filing Fee & tified Copy onal copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
		ı <u>g Address</u>		Street Address	
		Filing Section on of Corporations		New Filing Section D The Centre of Tallah	
	P.O. B	30x 6327		2415 N, Monroe Stre	
	Tallah	assee, FL 32314		Tallahassee, FL 3230	در



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

2021 AUG 18 AM 11: 17

OF STATE SEE, FL

The name of the Limited Liabili	ty Company is:		SEC	TETARY
DD OMOS TI C			iA	LLAHAS!
PROVIOS, LLC	tain the words "Limited	Lightlity Company	"LLC "or "LLC")	
(Mast cont	and the words 1.mmed	Chaomis Company,	tance of the j	
ARTICLE II - Address: The mailing address and street a	ddress of the principal o	office of the Limited	Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	
Mikhail Danilov		Mikl	nail Danilov	
150 13th Ave South		150	13th Ave South	
Naples, FL 34102		Napl	es, FL 34102	
The name and the Florida street	Mikhail Danilov			
		Name		
	150 13th Ave South		_	
	Florida street addres	ss (P.O. Box <u>NOT</u> ac	ceptable)	
			24102	
	Naples	FL	34102	
	Naples City	FL State	Zip	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

"AMBR" = Authorized Member "MGR" = Manager  MGR	Mikhail Danilov 150 13th Aye South Naples, FL 34102	
-	150 13th Aye South	
MGR	150 13th Aye South	
	Naples, FL 54102	
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		一点
(Use attachment if necessary)		1,1
	CONTION (OPTION	111
CLE V: Effective date, if other than the date	e of filing: August 17, 2021 (OPTION becific and cannot be more than five business days prio	r to or 90 days
te of filing )		
: If the date inserted in this block does not	meet the applicable statutory filing requirements, this da	te will not be li
ocument's effective date on the Department	of State's records.	
CLE VI: Other provisions, if any.		
ino an fawiui ousmess.		
	- DocuSigned by:	
	Mikhail Danilou	
1		
(		<del></del>
Signature of a m This document is execu		Statutes.

## Filing Fees:

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)