

L210003700

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000313226 3)))



H210003132263ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
 Fax Number : (850)617-6381

From: Account Name : NEW LIFE COMPANY, INC.
 Account Number : 120150000122
 Phone : (786)218-4201
 Fax Number : (786)452-0986

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: OPENCORP@YAHOO.COM

**FLORIDA LIMITED LIABILITY CO.
 K & L DESIGN PERSONALIZED LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

AUG 23 2021
 SCOTT

2021 AUG 20 AM 9:31

2021 AUG 20 AM 11:12

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company is:

K & L DESIGN PERSONALIZED LLC

ARTICLE II

The street address of the principal office of the limited liability company is:

6110 SW 129TH PL APT 1706
MIAMI, FL 33183

The mailing address of the limited liability company is:

6110 SW 129TH PL APT 1706
MIAMI, FL 33183

ARTICLE III


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

LEIDYSBEL, ALVAREZ GUZMAN
(Name) (Last name)
6110 SW 129TH PL APT 1706
MIAMI, FL 33183

2021 AUG 20 AM 9:31

Having been named as registered agent and to accept service of process for the above state 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


Leidyabel Alvarez Guzman (Aug 19, 2021 15:36 EDT)

LEIDYSBEL, ALVAREZ GUZMAN
(Name) (Last Name)

ARTICLE IV

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


TITLE: AMGR
LEIDYSBEL, ALVAREZ GUZMAN
(Name) (Last Name)
6110 SW 129TH PL APT 1706
MIAMI, FL 33183

ARTICLE V

The effective date for this Limited Liability Company shall be:

08/19/2021

Signature of member or an authorized representative



Leidyssel Alvarez Guzman (Aug 19, 2021 15:36 EDT)

LEIDYSBEL, ALVAREZ GUZMAN
(Name) (Last Name)

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.