## L21000442565

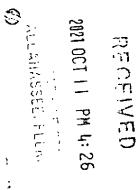
(Requestor's Name)
(Address)
(Address)
(0.10) 1 (2.10)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



900373130549

10/12/21--01002--013 \*\*125.00



The state of the s

## **Advanced Incorporating Service**

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

NAME OF ENTITY
135 Invertors CCC
FOR OFFICE USE ONLY
PICK ONE:
CERTIFIED COPYPHOTOCOPYC.U.S.
FILING:
CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP
FICTITIOUS NAMESERVICEMARK/TRADEMARKAMENDMENT
FOREIGN QUALIFICATIONJUDGMENT LIEN
OTHER
RETRIEVAL:
GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY
Of
APOSTILLE/NOTARY CERTIFICATION REQUEST:
Country
Amount of Documents
DATE 10/11/21 TIME
Notes:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

135 Investors, LLC	
(Must contain the words "Limited Liabil	ty Company, "L.L.C" or "LLC.")
Principal Office Address:	Mailing Address:
Principal Office Address: 200 2nd Avenue South	Mailing Address: Same
	Mailing Address:

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

Universal Registered Agents, Inc.

Name

1317 California Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32304

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. 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.,

(CONTINUED)

egistered Agent's Signature (REQUIRED)

2021 OCT | PM 12:07

## ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager	
C	DAGALLI OLUM
Manager	P&G Marketing Group, LLC 200 2nd Ave South, #417
	St. Petersburg, FL 33701
	<del></del>
(Use attachment if necessary)	
e date of filing.)	date of filing:
e date of filing.) ote: If the date inserted in this block does r e document's effective date on the Departn	e specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
e date of filing.) ote: If the date inserted in this block does re e document's effective date on the Departn	e specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
e date of filing.) ote: If the date inserted in this block does reduced to the Department's effective date on the Department's Country.	e specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
e date of filing.) ote: If the date inserted in this block does red document's effective date on the Department of the D	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed nent of State's records.
e date of filing.) ote: If the date inserted in this block does redocument's effective date on the Departm RTICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Michael Ha	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed ment of State's records.
e date of filing.) ote: If the date inserted in this block does redocument's effective date on the Department of a second of the Department of the Dep	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed ment of State's records.  Molecular than a supplicable statutory filing requirements, this date will not be listed ment of State's records.
REOUIRED SIGNATURE:  **Michael Ha Signature of a This document is ex This document is ex That any aware that any	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed ment of State's records.  In member or an authorized representative of a member, secuted in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State
e date of filing.) ote: If the date inserted in this block does redocument's effective date on the Department of the Department of a signature of a signatur	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed ment of State's records.  Molecular than a supplicable statutory filing requirements, this date will not be listed ment of State's records.
REOUIRED SIGNATURE:  Michael Ha Signature of a This document is ex I am aware that any constitutes a third de	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed aent of State's records.  In member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Fiorida Statutes, false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.
REOUIRED SIGNATURE:  Michael Ha Signature of a This document is ex This document is ex Tam aware that any	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed aent of State's records.  In member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Fiorida Statutes, false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.
e date of filing.) ote: If the date inserted in this block does redocument's effective date on the Department of the Dep	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed nent of State's records.  I member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Fiorida Statutes, false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.  I bleton  Typed or printed name of signee
e date of filing.) ote: If the date inserted in this block does redocument's effective date on the Department of the Dep	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed aent of State's records.  In member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Fiorida Statutes, false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.  In the provided of the department of State and the provided for in s.817.155, F.S.  In the provided of the provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees:  Organization and Designation of Registered Agent
e date of filing.) ote: If the date inserted in this block does redocument's effective date on the Department of the Dep	e specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed tent of State's records.  In member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.  In the provided or printed name of signee  Filing Fees:  Organization and Designation of Registered Agent  [1]