

L21000454407

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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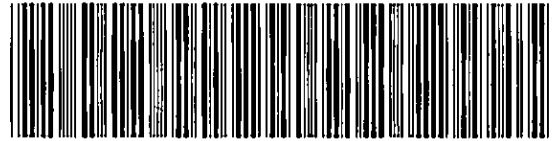
(Business Entity Name)

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DIVISION OF CORPORATIONS
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PAY PARTNER, LLC

Signature _____

Requested by: BA

10/19/21

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
✓ ____ L.C. File _____
____ Fictitious Name File _____
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____ Art. of Amend. File _____
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____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

PREPARED BY:
CARLOS DE CESPEDES, ESQ.
355 ALHAMBRA CIRCLE
SUITE 1101
CORAL GABLES, FLORIDA, 33134

**ARTICLES OF ORGANIZATION
OF
PAY PARTNER, LLC, a Florida Limited Liability Company**

PREAMBLE

We, the undersigned, do hereby associate ourselves under the following Articles, for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I

NAME

The name and principal place of business of the limited liability company shall be:

**PAY PARTNER, LLC, a Florida Limited Liability Company
7550 NW 101 Ct.
Doral, Florida, 33178**

ARTICLE II

GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this limited liability company is:

(1) To engage in any activity or business permitted under the laws of the United States and the State of Florida, except business governed by other regulatory statutes.

ARTICLE III

LIMITED LIABILITY COMPANY POWERS

This Limited company shall have all powers now and hereafter granted Limited Liability Companies for profit under the laws of the State of Florida.

ARTICLE IV

TERM OF EXISTENCE

This limited liability company shall exist perpetually.

ARTICLE V
MANAGEMENT

(1) The business of this limited liability company shall be conducted by the following Managers:

<u>NAME</u>	<u>ADDRESS</u>
Assor Lorenzo	7550 NW 101 Ct. Doral, Florida, 33178
Jose Rafael Gamez	7550 NW 101 Ct. Doral, Florida, 33178

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FALL AND SPRING

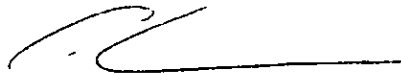
ARTICLE VI

STREET ADDRESS AND DESIGNATION OF REGISTERED AGENT

PAY PARTNER, LLC, a Florida Limited Liability Company, desiring to organize under the laws of the State of Florida, has designated its principal office and mailing address at **7550 NW 101 Ct., Doral, Florida, 33178**, and has named as its initial Registered Agent, **Carlos de Cespedes, Esq.**, whose address is at **355 Alhambra Circle, Suite 1101, Coral Gables, Florida, 33134**.

DATED this 19 day of October, 2021

By:



Carlos de Cespedes, as Attorney for PAY PARTNER, LLC, a Florida Limited Liability Company

ACKNOWLEDGMENT OF REGISTERED AGENT

I, **Carlos de Cespedes**, having been named to accept Service of Process for **PAY PARTNER, LLC, a Florida Limited Liability Company**, at the place designated in Article I of the attached Articles of Organization, I hereby accept to act in this capacity, accepting the duties as Registered Agent, and agree to comply with the provisions of said act relative to keeping open said office.

DATED this 19 day of October, 2021.

By:



**Carlos de Cespedes,
Registered Agent**