Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone

: (305)552-5973

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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.

Address:		
	Address:	Address:

FLORIDA LIMITED LIABILITY CO. SO-FLO BLUE, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

Florida Department of State

Attention: New Filings Section

To whom it may concern: This is to advise that the owners of are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

ARTICLES OF ORGANIZATION FOR FLORIDA LEMITED LIABILITY COMPANY

	SO-FLO B	LUE, LLC			
(Must conta	in the words "Limited	Lisbility Company	/, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The malling address and street ad	ldress of the principsi o	ffice of the Limits	d Liability Company is:		
Principi	Office Address:		Mailing Address:		
16159 NW 79 TH A		16	159 NW 79TH AVE		
MIAMI LAKES, PL	33016		AMI LAKES, FL 13016		
The company company	Cannot sorve as ils own	& Registered Age	us ² e Sinasaura		202
nother business entity with an ac	cannot sorve as its own ctive Florida registratio	& Registered Agent.			707 KOA
nother business entity with an ac	cannot sorve as its own otive Florida registration ddress of the registered	& Registered Agent. n.) agent are:	us ² e Sinasaura		
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nother business entity with an ac	cannot sorve as its own otive Florida registration ddress of the registered	& Registered Agent. n.) agent are: ODRIGUEZ Name	us ² e Sinasaura		HUV 18 AH
inother business entity with an ac	cannot sorve as its own citive Florida registration ddress of the registered ZACH REGOIE-R	& Registered Agent. n.) agent are: ODRIGUEZ Name	ent's Signature: You musi designate an individuat or		NOV 18 AH 8:
ARTICLE III - Registered Ages The Limited Liability Company of another business entity with an ac- fire name and the Florida street as	cannot sorve as its own other Florida registration ddress of the registered ZACH REGOIE R. 16159 NW 79 TH A	& Registered Agent. n.) agent are: ODRIGUEZ Name	ent's Signature: You musi designate an individuat or		HUV 18 AH

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 standes relating to the proper and complete performance of my auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" → Authorized Member "MGR" == Manager	Nama and Address:
MOR	ZACH REGGIE RODRIGUEZ 16159NW 79TH AVE
	MIAMI LAKES, FL)1016
MOR	ODALYS P. FRONTELA 16159 NW 79TH AVE MIAMI LAKES, FL 33016
MGR	HAMLET SANCHEZ (6139 NW 79TH AVE MIAMI LAKES, FL 33016
, and the state of	
(Uso attachment if necessary)	
ective date is listed, the date must be a of filling.)	to of filing: NOVEMBER 10/2021 (OPTIONAL) specific and cannot be more than five business days prior to or 90 smoot the applicable statutory filing requirements, this data will not at of State's records.

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Plorida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree falony as provided for in £817.155, P.S.

ZACH REGGIE R. ODALYS PRONTELA HAMLET SANCHEZ
Typed or printed name of signee

REQUIRED SIGNATURE: