

Franci Yanet Av

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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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.

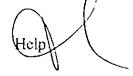
Email Address:

FLORIDA LIMITED LIABILITY CO. ZOYCA SYSTEM GROUP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ZOYCA SYSTEM GR	OUP, LLC				
(Must contain	the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address:			- 1 - 1 - 1		
The mailing address and street add	ress of the principal of	office of the Limited	Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address:		
112 LAKESIDE RD					
SEBRING, FL 33870		SAM	1E		
				lual or	
ARTICLE III - Registered Agent (The Limited Liability Company can another business entity with an act	annot serve as its own	Registered Agent.		iual or	
The Limited Liability Company ca another business entity with an act	annot serve as its own ive Florida registratio	n Registered Agent. \on.)		<i>8</i> 9 ,	
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The Limited Liability Company canother business entity with an act	annot serve as its own ive Florida registration dress of the registered	n Registered Agent. Non.) d agent are: SO GONZALEZ Name		ZZ DEC	
(The Limited Liability Company canother business entity with an act	annot serve as its own ive Florida registration dress of the registered ANYSLEN ALFON	n Registered Agent. Non.) d agent are: SO GONZALEZ Name	You must designate an individ	- 230	
(The Limited Liability Company ca another business entity with an act The name and the Florida street add	annot serve as its own ive Florida registration dress of the registered ANYSLEN ALFON	n Registered Agent. Non.) d agent are: SO GONZALEZ Name	You must designate an individ	777, DEC -9	-

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)

From: Yanet Avila

DARGOTON AND LAZ 1	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	ANYSLEN ALFONSO GONZALEZ
	112 LAKESIDE RD SEBRING, FL 33870
	SEDKING, PE 33070
	(%)
(Use attachment if necessary)	.C
,	date of filing: 01/01/2022 (OPTIONAL)
TLE V: Effective date, if other than the ffective date is listed, the date must be	e specific and cannot be more than five business days prior to or 90 days a
• of filing)	f
	not meet the applicable statutory filing requirements, this date will not be list
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CLE VI: Other provisions, if any.	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ANYSLEN ALFONSO GONZALEZ

Typed or printed name of signce