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.

(((H21000456879 3)))



H210004568793ABC9

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 : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Entër 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. **ADELINA Outsourcing LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

	Adelina Outsou	urcing LLC			
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")					
ARTICLE II - Address: The mailing address and street add	dress of the principal of	fice of the Limited	Liability Company is:		
Principal Office Address:			Mailing Address:		
7901 4th St N ST St. Petersburg FL, 337			1 4th St N STE 300 etersburg FL, 33702		
(The Limited Liability Company of another business entity with an ac	cannot serve as its own letive Florida registration	Registered Agent. \\ 1.)	ou must designate an individua		
(The Limited Liability Company of another business entity with an ac	cannot serve as its own letive Florida registration	Registered Agent. \\ 1.) agent are:	ou must designate an individua		
(The Limited Liability Company of another business entity with an ac	cannot serve as its own letive Florida registration ddress of the registered	Registered Agent. \\ 1.) agent are:	ou must designate an individua		
(The Limited Liability Company of another business entity with an ac	cannot serve as its own letive Florida registration ddress of the registered	Registered Agent. Vin.) agent are: Agent, LLC Name	ou must designate an individua	2021 DEC 15	I
(The Limited Liability Company of another business entity with an ac	cannot serve as its own lettive Florida registration ddress of the registered  Northwest Registered	Registered Agent. Vol.) agent are: Agent, LLC Name	Ou must designate an individua	2021 DEC 15 PH	!
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	cannot serve as its own lettive Florida registration ddress of the registered  Northwest Registered  7901 4th ST N STE 36	Registered Agent. Vol.) agent are: Agent, LLC Name	Ou must designate an individua	2021 DEC 15	)

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Α	RT	F	IV.
	n i	 4 II.	

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Memb	per
"MGR" = Manager	
AMBR	Oleg Chornobryvtsev
	7901_4th_St_N_STE_300
	St. Petersburg, FL 33702
AMBR	Fedir Demianenko 7901 4th St N STE 300
	St. Petersburg, FL 33702
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
AMBR	Anna Derenko
	7901 4th St N STE 300
	St. Petersburg, FL 33702
AMBR	Viacheslav Odvnokov
	7901 4th St N STE 300 St. Petersburg. FL 33702
	St. reteisoute, FL 33/02
(If an effective date is listed, the date in the date in the date of filing.)	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days after t does not meet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:  Signati This docume	
I am aware th	third degree felony as provided for in s.817.155, F.S.
Mor	rgan Noble
	Typed or printed name of signee

Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

. . .

Additional Members: AMBR Marta Kindzerska 7901 4th St N STE 300 St. Petersburg, FL 33702

AMBR Kostiantyn Demianenko 7901 4th St N STE 300 St. Petersburg, FL 33702

AMBR Yevgeniya Frimer 7901 4th St N STE 300 St. Petersburg, FL 33702