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		CERTIFIED COPY					
	XX	РНОТОСОРУ					
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	xx	FILING	LLC	,			
1.	_	HELLENIC INFUEN	CE BAND CUMENT #)	, LLC			
2.	_	(CORPORATE NAME AND DO	CUMENT #)				
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COVER LETTER

TO:	New Filing Sec Division of Co					
211P.11		C INFLUENCE BANI),LLC			
SUBJ	ECT:	Name of Limited Liability Company				
The en	closed Articles of	Organization and fee(s) are sut	omitted	for filing.	
Please	return all corresp	ondence concerning this	matter	to the f	ollowing:	
	FILIPPOS I	CELARIS				
			N	ame of	Person	
	·			irm/Co		
	34 JUDY PI	ACE	1"	шиксо	mpany	
				Addre		
	KEY LARG	6O, FL 33037				
	FILIPOSKEI	.ARIS1@GMAIL.COM		State and	d Zip Code	
	<u> </u>	E-mail address: (to be u	sed for	future a	nnual report notificat	ion)
or furtl	ner information co	oncerning this matter, pl	ease cal	t:		
	LESLIE FEI		786 (663-0502)	
	Nan	ne of Person	Area (Daytime Telephon	ne Number
Enclos	sed is a check for t	he following amount:				
≣ \$12	5.00 Filing Fee	□\$130.00 Filing Fee Certificate of Status		Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
		ng Address Filing Section			Street Address New Filing Section D	ivision
	Divisi P.O. E	on of Corporations Box 6327 assee, FL 32314		•	The Centre of Tallah 2415 N. Monroe Stre Tallahassee, Ft. 3230	assee et. Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HELLENIC INFI	JUENCE BAND, LLC		
(Must c	ontain the words "Limited Li	bility Company, "L	.L.C.," or "LLC.")
RTICLE II - Address: ne mailing address and stree	et address of the principal off	ce of the Limited Lis	ability Company is:
<u>Prin</u>	cipal Office Address:	Mailing Address: FILIPPOS KELARIS	
FILIPPOS KELA	RIS		
34 JUDÝ PLACE		34 JUDY PLACE	
KEY LARGO, FL 33037		KEY L	ARGO, FL 33037
he Limited Liability Compo other business entity with a	an active Florida registration eet address of the registered a	egistered Agent. Yo)	s Signature: u must designate an individual or
The Limited Liability Comparison business entity with a	any cannot serve as its own R an active Florida registration. cet address of the registered a FILIPPOS KELARIS	egistered Agent. Yo)	
he Limited Liability Compa other business entity with	any cannot serve as its own R an active Florida registration. cet address of the registered a FILIPPOS KELARIS	egistered Agent. You) gent are:	
The Limited Liability Comparison business entity with a	any cannot serve as its own R an active Florida registration. eet address of the registered a FILIPPOS KELARIS	egistered Agent. You) gent are: Name	u must designate an individual or
The Limited Liability Comparison business entity with a	any cannot serve as its own R an active Florida registration. eet address of the registered a FILIPPOS KELARIS 34 JUDY PLACE	egistered Agent. You) gent are: Name	u must designate an individual or
The Limited Liability Composition of the Limited Liability Composition of the Florida strong and the Florida stron	any cannot serve as its own R an active Florida registration. eet address of the registered a FILIPPOS KELARIS 34 JUDY PLACE Florida street address (KEY LARGO City	egistered Agent. You gent are: Name P.O. Box NOT acce FL. State	u must designate an individual or

(CONTINUED)



ARTICLE IV-

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

Title:	Name and Address;
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	FILIPPOS A KELARIS
	34 JUDY PLACE
	KEY LARGO, FL 33037
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
(If an effective date is listed, the date must h	e specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
Note: If the date inserted in this block does	not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departm	nent of State's records.
ARTICLE VI: Other provisions, if any.	
ARTICLE VI. Onlei provisions, if any.	
REQUIRED SIGNATURE:	
ALCONED SIGNATURE.	
Signature of	member or an authorized representative of a member.
This document is ex	secuted in accordance with section 605.0203 (1) (b). Florida Statutes.
I am aware that any	false information submitted in a document to the Department of State
constitutes a third de	egree felony as provided for in s.817.155, F.S.
FILIPPOS K	
	Typed or printed name of signee

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)