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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LEADER ASSOCIATES LLC
Account Number : I20180000056
Phone : (954)998-3963
Fax Number : (954)697-0359

****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.

TAGIN P. CO. LLC

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

RECEIVED

2022 JAN 14 PM 4:11

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ARTICLES OF ORGANIZATION FOR
LIMITED LIABILITY COMPANY

ARTICLE I – NAME

The name of the Limited Liability Company shall be

TAGIN P. CO. LLC

ARTICLE II – ADDRESS

The Principal street address of the Limited Liability Company shall be

150 SE 2nd AVE #300

MIAMI, FL 33131

The Mailing address of the Limited Liability Company shall be

SAME AS PRINCIPAL

ARTICLE III – REGISTERED AGENT

The name and Florida street address (PO BOX not acceptable) of the Registered Agent are

BOOKSLY, LLC

6919 SW 18th ST STE. 222

BOCA RATON, FL 33433

Having been named as Registered Agent and to accept service of process for the above 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 for in Chapter 605, F.S.

DocuSigned by:

Abel Fiorat Loureiro

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Registered Agent (Signature)

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1/14/2022
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DocuSign Envelope ID: B927F8EA-2DFF-4557-9D36-25062B19411E

ARTICLE IV – MANAGERS

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

Name: **NAISSA GOES P CARDOSO**

Title: **MGR**

Address: **150 SE 2nd AVE #300**

MIAMI, FL 33131

Name: **TIAGO PINHO C DA SILVA**

Title: **MGR**

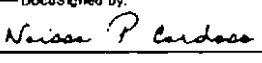
Address: **150 SE 2nd AVE #300**

MIAMI, FL 33131

ARTICLE V – EFFECTIVE DATE

Effective date shall be the **filling date**.

REQUIRED SIGNATURE:

DocuSigned by:

05341EB99D7C429
NAISSA GOES P CARDOSO - Member or AMBR

1/12/2022

Date

2022-01-14 21:05:46
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