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	(Requestor	's Name)	
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FLORIDA FILING & SEARCH SERVICES, INC.

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DATE:

2/7/2022

NAME: THE PRODUCT KINGS 7 LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: The Product Kings 7 LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brandon Lugo Name of Person
The Product Kings 7 LLC. Firm/Company
18051 Biscoyne Blvd. Apt 203
City/State and Zip Code DZ cly GODIC F (0 y C) DOO COOP E-mail address: (to be used for future annual report notification)
bzdynamics @yahoo.com.
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Right Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must con	The Procuet Limited Liability Co	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street	address of the principal office of the	Limited Liability Company is:
Prince	pal Office Address:	Mailing Address:
Care .	3:50 June Blad	
18051 Apl.	3:55 cayne Blvd 403 1209, Fl 33160	
ARTICLE III - Registered A	gent, Registered Office, & Register y cannot serve as its own Registered	red Agent's Signature: Agent. You must designate an individual or
ARTICLE III - Registered A (The Limited Liability Compar another business entity with an	gent, Registered Office, & Register y cannot serve as its own Registered	
ARTICLE III - Registered A (The Limited Liability Compar another business entity with an	gent, Registered Office, & Register ny cannot serve as its own Registered nactive Florida registration.)	Agent. You must designate an individual or
ARTICLE III - Registered A (The Limited Liability Compar another business entity with an	gent, Registered Office, & Register by cannot serve as its own Registered active Florida registration.) t address of the registered agent are: Py Cyclon Name	Lugio Agent. You must designate an individual or

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)



Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR (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 be 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 Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed 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 degree felony as provided for in s.817.155, F.S. Typed or printed name of signee

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certifled Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)