

LAZARUS CORPORATE FILING SERVICE
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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 : LAZARUS CORPORATE FILING SERVICE, INC.
 Account Number : I20000000019
 Phone : (305)552-5973
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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.****

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FLORIDA LIMITED LIABILITY CO.
SOUBLETTE HOME IMPROVEMENT LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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Corporate Filing Menu

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2022 FEB -9 AM 9:34

FLORIDA DEPARTMENT OF STATE

CO-FILED 02-18-2022

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Soublette Home Improvement LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

9100 SW 137th terrace,

Miami, FL 33176

Apt: B

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

Patrick Luis Soublette

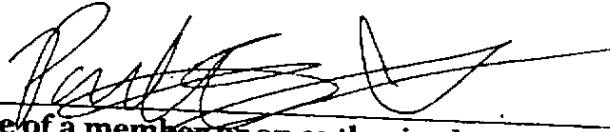
9100 SW 137th terrace

miami FL 33176 Apt B

ARTICLE IV

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

Patrick Luis Soublette (AMBR)

Required Signatures:**Signature of a member or an authorized representative of a member.**

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Patrick Luis Sublette**Typed or printed name of signee**

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 in Chapter 605, F.S..

**Registered Agent's Signature (REQUIRED)**2022 FEB -9 AM 2:05
CLERK OF THE COURT
STATE OF FLORIDA

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