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Division of Corporations

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\*\*Enter the email address for this business entity to be used for future  
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FLORIDA LIMITED LIABILITY CO.  
TIMELESS AUTO, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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February 16, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: TIMELESS AUTO, LLC

REF: W22000018814

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

TIMELESS AUTO, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:****Mailing Address:**7029 NW 7th AVE  
MIAMI, FL 331507029 NW 7th AVE  
MIAMI, FL 33150**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(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.)

The name and the Florida street address of the registered agent are:

MELISSA JEUDY

Name

7029 NW 7th AVEFlorida street address (P.O. Box **NOT** acceptable)MIAMIFL33150

City

State

Zip

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 and 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)

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 FLORIDA

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**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

AMBR

ROODY RAMEAU  
7029 NW 7th AVE  
MIAMI, FL 33150

AMBR

MELISSA JEUDY  
7029 NW 7th AVE  
MIAMI, FL 33150

(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 30 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.

ROODY RAMEAU

Typed or printed name of signer

**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)**

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90 days after

will not be listed as

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