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 : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email	Address:	

FLORIDA LIMITED LIABILITY CO. R & B CONSULTING SERVICES GROUP LLC

Certificate of Status	1
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Estimated Charge	\$130.00



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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	ĭ	_	Na-
771	-	_	TATHE:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	_
937NW 132 AVE W, Miani, Fl, 33/82	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Utability with an active Florida registration.) Registered Agent. You must designate an individual or another business entity Robert Barritet	-
937 NW 137 ADE W, MIAHI, FC, 33/88 =	
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	-
Puben Benitet (AMBR)	- -
	-

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LAZARUS CORPORATE

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Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (i) (b). Rorids Statutes, the execution of this document constitutes an affirmation under the penalties of perjuty that the facts stated herein are true. I am aware that any take information submitted in a document to the Department of State constitutes a third degree falony as provided for in a \$17.153, F.S.

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 herely 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 for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)