

3-18-22, 5:05

Division of Corporations

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.
DROPSHIP STEPS LLC**

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

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR
LIMITED LIABILITY COMPANY

ARTICLE I – NAME

The name of the Limited Liability Company shall be

DROPSHIP STEPS LLC

ARTICLE II – ADDRESS

The Principal street address of the Limited Liability Company shall be

9626 TOWN PARC CIR S

PARKLAND, FL 33076

The Mailing address of the Limited Liability Company shall be

SAME AS PRINCIPAL

ARTICLE III – REGISTERED AGENT

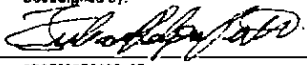
The name and Florida street address (PO BOX not acceptable) of the Registered Agent are

JULIANO B PERETTI

9626 TOWN PARC CIR S

PARKLAND, FL 33076

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:

203F538E568043F

Registered Agent (Signature)

FILED
2022 MAR 21 PM 7:28
CLERK OF DISTRICT COURT
JULIANO B PERETTI

DocuSign Envelope ID: 9C2AB90A-19D8-4E26-B85F-5A90233069BD

ARTICLE IV – MANAGERS

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

Name: **JULIANO B PERETTI**

Title: **MGR**

Address: **9626 TOWN PARC CIR S
PARKLAND, FL 33076**

ARTICLE V – EFFECTIVE DATE

Effective date shall be the **filing date**.

REQUIRED SIGNATURE:

DocuSigned by:

703F531E568043F
JULIANO B PERETTI - Member of AMBR

3/18/2022

Date

FILED

2022 MAR 21 PM 7:28

Notary Public, Florida