

L22 000176939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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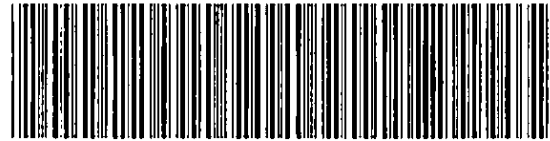
(Business Entity Name)

(Document Number)

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LLC

1. INDIGO PRINT LLC

(CORPORATE NAME AND DOCUMENT #)

2.
(CORPORATE NAME AND DOCUMENT #)

3.
(CORPORATE NAME AND DOCUMENT #)

4.
(CORPORATE NAME AND DOCUMENT #)

5.
(CORPORATE NAME AND DOCUMENT #)

6.
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

INDIGO PRINT LLC

ARTICLE II.

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

13750 Bluestone Lake Court

Davie FL 33325

The mailing address of the Limited Liability Company is:

13750 Bluestone Lake Court

Davie FL 33325

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TALLAHASSEE, FL

ARTICLE III.

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

ARTICLE IV.

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

HARGITTAI, ISTVAN

13750 Bluestone Lake Court

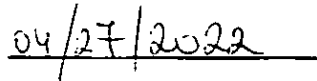
Davie FL 33325

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 for in Chapter 605, F.S.



Registered Agent's Signature



Date:

ARTICLE V.

The name and address of each Manager or Managing Member is as follows:

Name and Address:

HARGITTAI, ISTVAN

Title : MGRM

13750 Bluestone Lake Court

Davie FL 33325



HARGITTAINE HORVATH ,KRISZTINA

Title: MGRM

13750 Bluestone Like Court

Davie FL 33325

Krisztina Hargittai R.

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.

[Signature]

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

ISTVAN HARGITTAI

Typed or printed name of signee

04/27/2022

Date

SEVENTH
TALLAHASSEE, FL

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