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Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : AVA FINANCIAL CONSULTANTS INC
Account Number : I20170000094
Phone : (954)842-1979
Fax Number : (954)905-4315

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: KAMRAN.FEPS@GMAIL.COM

RECEIVED

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

**FLORIDA LIMITED LIABILITY CO.
LABORATORY CONSULTATION SOLUTIONS LLC**

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

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COVER LETTER

TO: New Filing Section
Division of Corporations

H22-000 1629033

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SUBJECT: LABORATORY CONSULTATION SOLUTIONS LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAMRAN MEMON

Name of Person

LABORATORY CONSULTATION SOLUTIONS LLC

Firm/Company

8557 NW 47TH STREET

Address

CORAL SPRINGS, FL 33067

City/State and Zip Code

kaniran.fsps@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAMRAN MEMON

954

888-8361

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF ORGANIZATION OF
LABORATORY CONSULTATION SOLUTIONS LLC**

Pursuant to s.605.0201, Florida Statutes

Articles 1 – NAME

The name of the LLC shall be: **LABORATORY CONSULTATION SOLUTIONS LLC**

Articles 2 – PRINCIPAL OFFICE

The principal place of Business / Mailing address is:

**8557 NW 47TH STREET
CORAL SPRINGS, FL 33067**

Mailing Address:

**8557 NW 47TH STREET
CORAL SPRINGS, FL 33067**

Article 3 – REGISTERED AGENT

The name and Florida street address of the Registered Agent is:

**KAMRAN MEMON
8557 NW 47TH STREET
CORAL SPRINGS, FL 33067**

Articles 4 – INITIAL AUTHORIZED MEMBERS

The names and Addresses:

AMBR

**KAMRAN MEMON
8557 NW 47TH STREET
CORAL SPRINGS, FL 33067**

Articles 5 – POWER OF THE LLC

The LLC shall have the same powers as an individual to do all things necessary or convenient to carry out its Business and Affairs, subject to the limitations or restrictions imposed by applicable law or these Articles of Organization.

DEPARTMENT OF STATE
CLERK OF CORPORATION
TALLAHASSEE, FLORIDA

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Articles 6 – TERMS OF EXISTANCE

The LLC shall have perpetual existence.

Articles 7 – EFFECTIVE DATE

These articles of organization shall be effective upon approval of the Secretary of State, State of Florida.

Articles 8 – PURPOSE OF THE LLC

The LLC shall engage in any activity or Business permitted under the law of the United States and of the State of Florida.

Articles 9 – BY LAWS

The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Director and the shareholders.



Signature Registered Agent
(KAMRAN MEMON)

5/4/22

Dated



Signature / Managing Member
(KAMRAN MEMON)

5/4/22

Dated

CLERK OF COURT
STATE OF FLORIDA
JANUARY 1, 2022

2021 MAY -5 PM 1:10

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