L22000202417

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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05/13/22--01034--008 **125.00

PRIZE MAY 13 PH 3: 12022 MAY 13 PM 2:

DIVISION OF CORPORATIONS TALLAHASSEE, F

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

19 to Start LLC			
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			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
		ļ	Trade/Service Mark
			Merger File
		}	Art, of Amend, File
			RA Resignation
		İ	Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
			Driving Record
Requested by: SETH	05/12/22		UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
Hallie	Date		UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJE	Name of Limited Liability Company
The enc	closed Articles of Organization and fee(s) are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
	Justin Saka
	Name of Person
	Firm/Company
	3734 NC 208th St. Address
	Aventura Fi. 33/80 (ity/State and Zip Code
For further	r information concerning this matter, please call:
	Justin Saka at 305, 301-1880 Name of Person Area Code Daytime Telephone Number
Enclosed	Lis a check for the following amount:
,	Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S130.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:	
The name of the Limited Liability Company is:	2022 HAV 10 -
19 to Start, LLC.	2022 MAY 13 PM 2: 53
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC."	SECRETARY OF STATE
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is	
Principal Office Address: Mailing	Address:
3734 Ne 208th St. Same Aventura, Fi. 33/80	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate a another business entity with an active Florida registration.)	in individual or
The name and the Florida street address of the registered agent are:	
Turkin Call	
Name	_
3734 NE 208th St.	
Florida street address (P.O. Box NOT acceptable)	_
Aventura, Fr. 33/80 City State Zip	
City State Zip	_
Having been named as registered agent and to accept service of process for the above stated limited in place designated in this certificate. I hereby accept the appointment as registered agent and agree to further agree to comply with the provisions of all statutes relating to the proper and complete perform am familiar with and accept the obligations of my position as registered from as provided for in Charles Registered Spent's Signature (REQUIRED)	
(CONTINUED)	

ARTICLET	١
The name and	i

Title:		authorized to manage and control the Limited Liability Company:		
"AMBR" = Authoria	zed Member	Name and Address:		
"MGR" = Manager	teo arenner			
MGR	Justin Saka			
	_	3734 NC 20875 St.		
		Anentura Fr. 32/30		
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(Use attachment if ne	cessary)			
ARTICLE V: Effective date: i	Cother than the docest if it	Ti		
(If an effective date is listed at	he date must be specifi	iling:		
the date of filing.)	is said mass in specim	c and Camior be more than tive business days prior to or 90 day	s after	
Note: If the date inserted in the	is block does not meet	the applicable statutory filing requirements, this date will not be	Dise of ma	
the document's effective date	on the Department of Si	tate's records	nsted as	
ARTICLE VI: Other provision	s, if any.			
			_	
REOUIRED SIGNA	THOR.	\bigwedge		
REOURED SIGNA	TUKE;	// \ \		
	(1)			
	Signature of a manual	an authorized representative of a member.		
This	document is executed in	n accordance with section 605,0203 (1) (b). Florida Statutes.		
I am a	aware that any false info	Ormation submitted in a document to the Department of State		
consti	itutes a third degree felo	ony as provided for in s.817.155, F.S.		
	<u></u>	stin Saka		
	ly	sped or printed name of signee		

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)