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H220001805163ABC

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : NELSON & ASSOCIATES, C.P.A., P.A.

Account Number : I20120000083 Phone : (305)593-0829 Fax Number : (305)593-8744

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

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## FLORIDA LIMITED LIABILITY CO. Giemza LLC

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Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
Giemza LLC				·
(Must contail	the wordsynfilm toda	and his Compan	AND THE STREET OF THE STREET	
ARTICLE II - Address: The mailing address and street add	ress of the principal o	ffice of the Limit	ed Liability Company is:	
Principal	Office Address:		<u>Mainiam</u>	Fessi)
1985 NW 88th Court	, Sulte 202	19	985 NW 88th Court, Sult	e 202
Doral, FL 33172		<u>D</u>	oral, FL 33172	
ARTICLE III - Registered Agen (The Limited Liability Company contents business entity with an act	annot sorve as its own tive Florida registratio	Registered Agen	ent's Signature: t. You must designate an in	idi <b>vidual or</b>
The name and the Florida street ad	dress of the registered	agent are:		
	NELSON 8	ASSOCIATE	S CPA	
		Name		
	1985 NW 8	8th Court, Su	ite 202	
	Florida street address	(P.O. Box <u>NOT</u>	acceptable)	
	Dora	l, FL 33172		
•	City	State	Zip	
Having been named as registered ag place designated in this certificate, I further agree to comply with the prov am familiar with and accept the oblig	hereby accept the appo visions of all statutes re gations of my position a	ointinent as registilating to the prop as registered ager	ered agent and agree to act er and complete performan it as provided for in Chapte ————————————————————————————————————	in this capacity. I ce of my duties, and I

Ettlei:			Name and Address	
	Authorized M	lember		
MGR'' = M			Atherical Composite Month	
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			Deepl El 22172	_
			Dorel, FL 33172	_
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