

L220000319398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

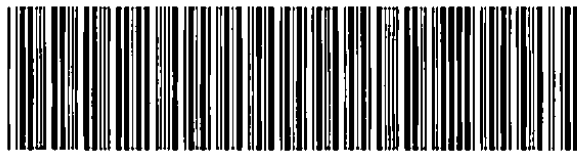
(Business Entity Name)

(Document Number)

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S. CHATHAM
JUL 20 2022

ALLAHASSEE, FLOR

2022 JUL 20 PM 2:22

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22 JUL 20 PM 6:46

CAPITAL CONNECTION, INC.

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

MEJRA GDOLA LLC

Signature _____

Requested by: SETH

07/20/22

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File _____

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

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 _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

22 JUL 20 PM 6:46

**ARTICLES OF ORGANIZATION FOR
MEJIRA GDOLA LLC**

ARTICLE I – NAME:

The name of the Limited Liability Company is: Mejira Gdola LLC

ARTICLE II – ADDRESS:

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

Principal Office Address:

7355 SW 87th Avenue
Suite 200
Miami, FL 33173

Mailing Address:

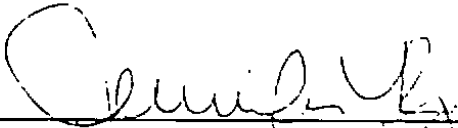
7355 SW 87th Avenue
Suite 200
Miami, FL 33173

ARTICLE III – REGISTERED AGENT:

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

Ruz & Ruz PL
7355 SW 87th Avenue
Suite 200
Miami, FL 33173

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

22 JUL 20 PM 6:46

ARTICLE IV -- AUTHORIZED PERSONS:

The name and address of each person authorized to manage and control the Limited Liability Company are:

Title
MGR

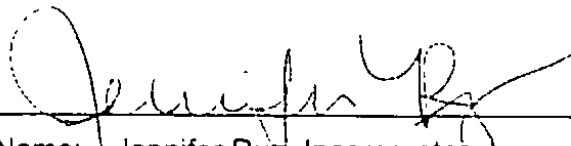
Name & Address
Gabriel Mendelzon
c/o Ruz & Ruz PL
7355 SW 87th Avenue, Ste 200
Miami, FL 33173

ARTICLE V -- EFFECTIVE DATE:

The effective date of these Articles of Organization is July 15, 2022.

REQUIRED SIGNATURE:

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.


Name: Jennifer Ruz, Incorporator

22 JUL 20 PM 6:46