# Electronic Articles of Organization For Florida Limited Liability Company

L22000324291 FILED 8:00 AM July 21, 2022 Sec. Of State jafason

## **Article I**

The name of the Limited Liability Company is: DANIEL LASH EXTENSIONS, LLC

#### **Article II**

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

208 FOXTAIL DRIVE B2 GREENACRES, . 33415

The mailing address of the Limited Liability Company is:

208 FOXTAIL DRIVE B2 GREENACRES, . 33415

#### **Article III**

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

STEEVE MULTISERVICES 2393 S CONGRESS AVE 131' WEST PALM BEACH, FL. 33406

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.

Registered Agent Signature: STEEVE BISSERETH

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: OWN FRIDELENE F DANIEL 208 FOXTAIL DRIVE B2 GREENACRES, FL. 33415 L22000324291 FILED 8:00 AM July 21, 2022 Sec. Of State jafason

### **Article V**

The effective date for this Limited Liability Company shall be:

07/16/2022

Signature of member or an authorized representative

Electronic Signature: FRIDELENE DANIEL

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.