Laa000335899

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300391747403

07/29/22--01003--023 **125.00

S. CHATHAM

AUG - 1 2022

ALI AHASSEF, FI DI

Advanced Incorporating Service

2,4

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

Wedste. WWw.asheb.edh	
Rack Solar, L.I.C.	
FOR OFFICE USE ONLY	
PICK ONE:	
CERTIFIED COPYPHOTOCOPYC.U.S.	
FILING:	
CORPORATIONLLCLIMITED PARTNERSHIPGENERAL PARTNERSHIP	Þ
FICTITIOUS NAMESERVICEMARK/TRADEMARKAMENDMENT	
FOREIGN QUALIFICATIONJUDGMENT LIEN	
OTHER	
RETRIEVAL:	S :3
GOOD STANDING CERT/C.U.SCERTIFIED COPYPHOTOCOPY	3
Of	
APOSTILLE/NOTARY CERTIFICATION REQUEST: Country	
Country	
Amount of Documents	
DATE 7/29/22 TIME	
Notes:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name	
The name of the Lim	ited Liability Company is:
RACK SO	DLAR, LLC
	(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
153 NW 16TH ST	Same
BOCA RATON, FL 33432	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JESSE RACK		
	Name	
153 NW 16TH ST		
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Boca Raton	FL	33432
City	State	Zip

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..

(CONTINUED)

ARTICLE IV-

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

<u> 1100:</u> "AMDD" = 3	authorized Member	Same and Address:	
"MGR" = Mi			
	mager		
MGR		JESSE RACK 153 NW 16TH ST	
		BOCA RATON, FL 33432	
N 47 11 1		MANAGE DAZIZ	
MGR		JOHN J. RACK 153 NW 16TH ST	
		BOCA RATON, FL 33432	
/Hen aunahm	ent if necessary)		
(vise attacimi	ent (t necessary)		
f an effective date is e date of filing.) ote: If the date inser	listed, the date must be spec	f filing:	
e document s effecti	ve date on the Department of	state s rectirds.	
TICLE VI: Other p	rovisions, if any.		
		·	
proupri	CICNATUDE.		
REOUIKED	SIGNATURE:		
	Jesse Rack	iber or an authorized representative of a member.	
	This document is executed I am aware that any talse i	aber or an authorized representative of a member. If in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.	
	JESS <u>E RACK</u>		
	<u> </u>	Typed or printed name of signee	
		Elling Coast	\sim
\$135.00 PH	ing the few Austrian of Once	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)

22 JUL 29 FILLO: 00