Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email	Address	:			

FLORIDA LIMITED LIABILITY CO. ANGELICA HASSETT, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A Down	
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
—sinty company is:	
ARTICLE II ALL C	
APTICIAN TO THE PROPERTY OF TH	
Community address and street address of the principle.	
The mailing address and street address of the principal office of the Limited Liability	
- 4801 SW 53rd Terrace	
<u>9801 Sw 53rd Terrace</u> <u>Mianue</u> , Rl 33165	
Michille 81 22115	
30165	
A DITION IN THE	
ARTICLE III - Registered Agent, Registered Office:	
Commercial and the Florida street address of the register.	
The name and the Florida street address of the registered agent are: (The Limited Liability with an active Florida registered Agent. You must designate an individual or another business entity	
and delive rioriaa registration.)	
- Angelica Hassett	
9001	
1801 Sw 53rd Terrace	
Man 7 33165	
3916	
ARTICLE IV	
The name and title of a large	
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	
Liability Company: (MGR or AMBR)	
Digelica Hassett (AMBR)	
No.	
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Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of signee

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 (REQUIRED)

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