

L22600395048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

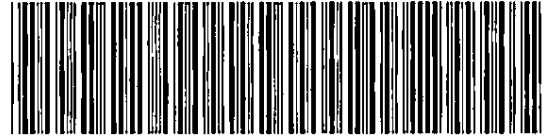
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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S. CHATHAM  
SEP 14 2022

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 SEP 13 PM 3:45

2022 SEP 13 PM 4:00

2022 SEP 13 PM 4:00

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

Please use funds from Account: 120210000160 Amount: \$125.00  
Authorization Signature: *Juanita*  
Lulu Group, LLC

Business

Document #

Walk in

\_\_\_ Pick up time \_\_\_

\_\_\_ Mail out

\_\_\_ Will wait

\_\_\_ Photocopy

\_\_\_ **Certified Copy (s) of Articles**

\_\_\_ **Certificate of Status**

**NEW FILINGS**

- \_\_\_ Profit
- \_\_\_ Not for Profit
- Limited Liability
- \_\_\_ Domestication
- \_\_\_ Other
- \_\_\_ **CORP**

**AMMENDMENTS**

- \_\_\_ Amendment
- \_\_\_ Resignation of R.A. Officer/Director
- \_\_\_ Change of Registered Agent
- \_\_\_ Dissolution/Withdrawal
- \_\_\_ Merger
- \_\_\_ **Conversion**
- \_\_\_ Articles of Conversion

**OTHER FILINGS**

- \_\_\_ Annual Report
- \_\_\_ Fictitious Name
- \_\_\_ **ARTICLES OF CORRECTION**

**REGISTRATION/QUALIFICATIONS**

- \_\_\_ Foreign filing
- Limited Partnership
- \_\_\_ Reinstatement

\_\_\_ APOSTIL( ) \_\_\_  
Country

\_\_\_ Other

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lulu Group, 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:

7337 Presidents drive  
Orlando, FL 32809

7337 Presidents Drive  
Orlando, FL 32809

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:

ZHIYI PENG

Name

7649 Golf Channel Drive

Florida street address (P.O. Box **NOT** acceptable)

Orlando

FL

32819

City

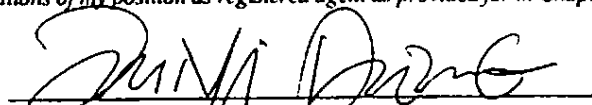
State

Zip

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*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)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

ZHIYI PENG  
7337 Presidents Drive  
Orlando, FL 32809

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use attachment if necessary)

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ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

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

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.

ZHIYI PENG  
\_\_\_\_\_  
Typed or printed name of signer

**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)