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Account Number : 120030000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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FLORIDA LIMITED LIABILITY CO. BARNABAS SOLUTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

ARTICLESON	DRGANIZATION FOR	FLORIDALIMITE	D LIABILTLY COMPANY
ARTICLE I - Name: The name of the Limited Liability	Company is:		
	BARNABAS SO	DLUTIONS LL	С
(Must contain	n the words "Limited	Liability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	fress of the principal (office of the Limite	d Liability Company is:
Principal	Office Address:		Mailing Address:
2727 ne 15 st Ft Lauderdale			2727 ne 15 street Ft Lauderdale ft 33304
ARTICLE III - Registered Agen (The Limited Liability Company canother business entity with an ac The name and the Florida street ac	aunot serve as its owi live Florida registration	n Registered Agent. on.)	ent's Signature: You must designate an individual or
	JOHN S	TANDART CE	PA
		Name	
	3007 W CO	MMERCIAL E	LVD ₂₀₄
	Florida street addres	ss (P.O. Box <u>NOT</u>	
	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..

> /s/ JOHN STANDART CPA Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

2822 DEC - 1 PM 1: 31

Title:	Authorized Member	Name and Address:	
"MGR" = M			
_ Mgr		Eric Johnson	
		-2727 ne 15 street -Ft Lauderdale fl 33304	
		1 Cauderdale II 33304	

TICLE V: Effectiv	nent if nocessary) we date, if other than the date	of filing: 11-30-2022 (OPTIONAL)	
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