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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020

Phone

: (813)435-3176

Fax Number

(813)333-6358

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

FLORIDA LIMITED LIABILITY CO.

SolDrive LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

From: 8139686732

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SolDrive 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:
3156 W New Haven Ave	3156 W New Haven Ave
West Melbourne Florida 32904	West Meibourne Fiorida 32904

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:

THE LAW OFFICES OF NICK SPRADLIN, PLLC

Name

4300 Biscavne Blvd Suite 203

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

Miami Florida 33137

City State Zin

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)

Registered Agent's Signature (REQUIRED)

To: 1,8506176381 From: 8139668732 12/8/2022 3:36:00 FM p. 3 of 3

ARTICLE IV-

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	Mary IV	
	Matvas Vas 3156 W New Heven Ave West Melbourne, Florida 2004	
	West Melbourne Florida 32904	
	10,100 3270	
<u>AMBR</u>	Zeuzenna Vena Maria	
	Zsuzsanna Vasne Moricz 3156 W New Haven Ave	·····
	West Melbourne Florida 32904	
		
		
		
(Use attachment if necessary)		
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