## Division of Corporations Electronic Filing Cover Sheet

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To:			<b>-</b> -
	Division of Corporations		
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	Account Number: I20000000015		
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	nter the email address for this business entity to be used for fuer annual report mailings. Enter only one email address please.**	8: 5 8: 5	
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## FLORIDA LIMITED LIABILITY CO. FRESH SOLUTIONS GROUP LLC

Certificate of Status	1
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Estimated Charge	\$130.00

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T. BURCH DEC 21 2022

## ARTICLES OF ORGANIZATION FOR

FLORIDA I IMPERIOR
FLORIDA LIMITED LIABILITY COMPANYSE  ARTICLE I - Name:  The name of the Limited Liability Company is:
Itresh solution
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability  Company is:
- Tooking plant
miami Florida, 33192 Apt 107
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Livined Lucibility)  Company cannot serve as its own Registered Agent. You must designate an individual or another instiness entity:  With an active Florida registration.)  Alesion Wis Leon Hender  9 S81 Lontwine bleav Blvd mion: Florida  33177 Apt 107
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
9581, Fontaine Blogu Blud
miami Florida, 33172. Apt 107.
Nestor luis león Hendez
- (AMBR)

Required Signatures:

3052201440

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 Depa tment of State constitutes a third degree felony as provided for in s.817.155, F S.

Nestor (uis leon Mendez

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)