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SECRETARY OF STATE

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COVER LETTER

	iew ruing Sec Division of Cor				
SUBJECT		50 Service Center LLC			
SUBJECT	·	Name of L	imited Liabil	ity Company	
The enclos	sed Articles of	Organization and fee(s)	are submitted	I for filing.	
Please rett	ım all correspo	ondence concerning this r	natter to the	following:	
	Ye Zhang				
			Name of	l Person	
		<u> </u>	Firm/Co	отраку	
	12905 SW 4	2nd St Unit 222			
	-		Add	ress	
	Miami				
	FL 33175		City/State as	nd Zip Code	
	I	E-mail address: (to be use	ed for future	annual report notificati	ion)
For further	information co	ncerning this matter, plea	ase call:		
	Ye Zhang	at (305	310 0315	
	Nam			Daytime Telephon	e Number
Enclosed	is a check for t	he following amount:			
■\$125. 0	0 Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certif	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F	ng Address Tiling Section		Street Address New Filing Section D	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243 PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160 AMOUNT: \$125.00 AUTHORIZATION SIGNATURE: Hialeah 2350 Service Center LLC Document Number, (if known): Business Name Pick up time____ Walk in ____ Will wait___ Photocopy Mail out __Certified Copy of the Articles of Organization Certificate of Status <u>AMMENDMENTS</u> **NEW FILINGS** Amendment Profit ___ Resignation of R.A. Officer/Director Not for Profit ___ Change of Registered Agent X Limited Liability Revocation of Dissolution Domestication __ Merger Other Conversion CORP Amended and restated Articles _ PLLC **Statement of Authority** REGISTERATION/QUALIFICATIONS **OTHER FILINGS** ___ Foreign filing Annual Report Limited Partnership Reinstatement Fictitious Name Other APOSTIL() __ Country

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

EXAMINIER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Mus	st contain the words "Limited L	.iability Company, '	L.L.C.," or "LLC.")			
RTICLE II - Address:						
he mailing address and s	treet address of the principal of	fice of the Limited	Liability Company is:			
<u>P</u>	rincipal Office Address:		Mailing Address:	S	20	
9272 SW 40th	S1	1290:	5 SW 42nd St Unit 222	TAER	2023 FEB	_
Miami, FL 331	65	Mian	ii, FL 33175		Щ	•
he Limited Liability Co.		Registered Agent, Y	t's Signature: 'ou must designate an individual	ARY OF	2	12.7
The Limited Liability Con nother business entity wi	impany cannot serve as its own ith an active Florida registration street address of the registered	Registered Agent. Y n.)	t's Signature: 'ou must designate an individual	MIASSEE. FL	-2 AM 10: 25	9
The Limited Liability Con nother business entity wi	mpany cannot serve as its own the an active Florida registration	Registered Agent. Y n.)	t's Signature: 'ou must designate an individual	ARY OF STATE	2	9
The Limited Liability Con nother business entity wi	impany cannot serve as its own ith an active Florida registration street address of the registered	Registered Agent, Y n.) agent are: Name	t's Signature: 'ou must designate an individual	ARY OF STATE	2	f
The Limited Liability Con nother business entity wi	mpany cannot serve as its own ith an active Florida registration street address of the registered Ye Zhang	Registered Agent, Yon.) agent are: Name	ou must designate an individual	ARY OF STATE	2	f
The Limited Liability Con nother business entity wi	mpany cannot serve as its own ith an active Florida registration street address of the registered Ye Zhang 12905 SW 42nd St Un	Registered Agent, Yon.) agent are: Name	ou must designate an individual	ARY OF STATE	2	

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 IVThe name and address of each person authorized to manage and control the Limited Liability Company: Title: "AMBR" = Authorized Member "MGR" = Manager AMBR Ye Zhane 12905 SW 42nd St Unit 222 Miami. FL 33175 SET OF THE STATE OF THE ST

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 \$.817.155, F.S.

Typed or printed name of signee

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)

the document's effective date on the Department of State's records.