Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. WILLIAMLULU LLC

Certificate of Status	1
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## ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY FOR

## ARTICLE I - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the Company is:  946 NW 4 <sup>th</sup> Teirace	principal office of the Limited Liab	ility
RTICLE III - Registered Agent, Registered Office name and the Florida street address of the spany cannot serve as its own Registered Agent. You must designed an active Florida registration.)  William Aloxander	fice: registered agent are: (Tha Limited Liability we on individual or another business entity	y
440 NE 4th of Florida	Circuit	2
	City, FL, 33034	S
FICLE IV		:
name and title of each		
e name and title of each person authorized to manage and control the Limited bility Company: (MGR or AMBR)		ري دي
	. 1	້. ບັນ
William Alexander Lu	LU LAMBR 1	
William Alexander Lu	LU (AMBR)	
William Alexander 11	11110000	

Required Signatures:

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

Typed or printed name of signee

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 herely 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

Registered Agent's Signature (REQUIRED)

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