

L23000089783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

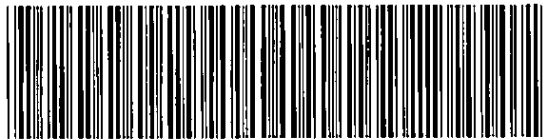
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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S. CHATHAM
FEB 28 2023

FILED
2023 FEB 20 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED
2023 FEB 20 PM 3:36
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2023

CORPORATION SERVICE COMPANY

SUBJECT: LAUDERHILL GROUP LLC
Ref. Number: W23000023923

RESUBMIT
Please give original
submission date as file date.

We have received your document for LAUDERHILL GROUP LLC. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L18000290579.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Regulatory Specialist III
Director's Office

Letter Number: 523A00004100

RECEIVED
2023 FEB 27 AM 11:23
ALLAHASSEL, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 511074 7634212

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : February 20, 2023

ORDER TIME : 1:39 PM

ORDER NO. : 511074-005

CUSTOMER NO: 7634212

DOMESTIC FILING

NAME: LAUDERHILL GROUP LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LAUDERHILL GROUP VENTURES 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:

40 SW 13TH STREET SUITE 802
MIAMI, FLORIDA 33130

Mailing Address:

40 SW 13TH STREET SUITE 802
MIAMI, FLORIDA 33130

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:

DYMAX INTERNATIONAL SERVICES INC.

Name

40 SW 13TH STREET SUITE 802

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

MIAMI

FLORIDA

33130

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.

DocuSigned by:



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FL

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

LAUDERHILL GROUP HOLDINGS INC.
40 SW 13TH STREET SUITE 802
MIAMI, FLORIDA 33130

SECRETARY OF STATE
TALLAHASSEE, FL

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 s.817.155, F.S.

Lauderhill Group Holdings Inc. - Ana Maria Burnes

Typed or printed name of signee