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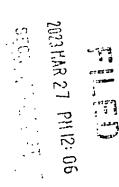
(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





600404500036

CHATHAM
MAR L8 2023







March 24, 2023

CAPITAL CONNECTION, INC.

SUBJECT: KAZAN POWER LLC Ref. Number: W23000040236

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

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

Summer Chatham Regulatory Specialist III Director's Office

2023 MAR 27 PH 1: 1

Letter Number: 023A00006826

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

KAZAN POWER LLC	
Please Debit 120000000257 For: 125	
Thank you Seth Neeley	
1-4-1	
All of	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Рһыо Сору
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
,	Officer Search
	Fictitious Search
Simon	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KAZAN POWER I. (Must con	tain the words "Limited I	Liability Company,	'L.L.C.," or "LLC.")	<del></del>	
ARTICLE II - Address:					
The mailing address and street a	iddress of the principal o	ffice of the Limited	Liability Company is:		
Princip	oal Office Address:		Mailing Address:		
5080 SW 73RD AV	<u>E</u>		SW 73RD AVE		
DAVIE, FL 33312		<u>DAV</u>	IE, FL 33312		
ARTICLE III - Registered Ag	ent, Registered Office,	& Registered Agen	t's Signature:		
The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registratio address of the registered	Registered Agent, Yon.)	t's Signature: 'ou must designate an individual		"
The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registratio	Registered Agent, Yon.)			
(The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registratio address of the registered	Registered Agent, Yon.) Lagent are: Name		2023 HAR 27 SECREPTA	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own active Florida registratio address of the registered IVAN PINEDA	Registered Agent, Yon.) Lagent are: Name	ou must designate an individual	2023 HAR 27 SECREPTA	4. C. 244 3.75 4.
(The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registratio address of the registered IVAN PINEDA 5080 SW 73RD AVE	Registered Agent, Yon.) Lagent are: Name	ou must designate an individual		4

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..

/5/ IVAN PINEDA

Registered Agent's Signature (REQUIRED)

(CONTINUED)

## ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Membe "MGR" = Manager	T .
MBR	IVAN PINEDA
	5080 SW 73RD AVE
	DAVIE. FL 33312
	ي
MGR	SUSANNA HERNANDEZ
MCIC	5080 SW 73RD AVE
	DAVIE, FL 33312
	2
	P 1
(If an effective date is listed, the date m the date of filing.)	n the date of filing: 03/20/2023 (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90 days after does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	)
× ×	
This document I am aware that	is executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State irid degree felony as provided for in s.817.155, F.S.
IVAN P	INFIDA
IVANI	Typed or printed name of signee
	. Mag or harmon name or signer

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)