

L23000141960

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

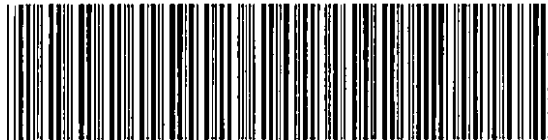
(Document Number)

Copies _____

Certificates of Status _____

Instructions to Filing Officer:

Office Use Only



000405302140

S CHATHAM
MAR 29 2023

03/28/23--01001

FILED
2023 MAR 28 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED
2023 MAR 28 AM 9:55
TALLAHASSEE, FLORIDA

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: CAT 3/28

☐

CERTIFIED COPY

xx

PHOTOCOPY

☐

CUS

xx

FILING

LLC

1. **SASROS GROUP, LLC**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:
SASROS GROUP, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

**543 RACQUET CLUB RD #35
WESTON, FL 33326**

Mailing Address:

**5816 SILVER LAUREL LANE
FREDERICK, MD 21704**

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

**CARMEN E. OSORIO
543 RACQUET CLUB RD #35
WESTON, FL 33326**

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.

/S/ CARMEN E. OSORIO

Registered Agent's Signature

(CONTINUED)

FILED
2023 MAR 28 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE IV- Members/Managers

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**ISABELA QUINTERO
5816 SILVER LAUREL LANE
FREDERICK, MD 21704**

AMBR

**ROSINA BARBASTEFANO
5816 SILVER LAUREL LANE
FREDERICK, MD 21704**

ARTICLE V: EFFECTIVE DATE

The effective date of this filing is March 27, 2023.

REQUIRED SIGNATURE:

/S/ Isabela Quintero

(Digital 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.

/S/ ISABELA QUINTERO

Typed or printed name of signee

FILED
2023 MAR 28 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FL