

L23000143198

Florida Department of State
Division of Corporations
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((H23000117469 3))



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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : ORANGE BUSINESS SOLUTIONS INC
Account Number : I20210000133
Phone : (305)417-9919
Fax Number : (305)938-8087

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
RicoMiami LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

12:31:11
3/28/23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
23 MAR 29 PM 12:35
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY H23000117469 3

ARTICLE I - Name:

The name of the Limited Liability Company is:

RicoMiami 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:

Mailing Address:

1000 West Ave

Unit 830

Miami Beach, FL 33139

1000 West Ave

Unit 830

Miami Beach, FL 33139

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:

ORANGE BUSINESS SOLUTIONS INC

Name

2100 Coral way, Suite 704

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

Miami

Fl

33145

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..

Tax & Accounting Team

MAR 23 2023 12:33:03 AM

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Mer

Rafael Rico
1000 West Ave, Unit S30
Miami Beach, FL 33139 US

(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:

Rafael Rico
MAR 28 2023 11:31:49

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.

Rafael Rico

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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