

To:

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2023-04-03 17:31:00 GMT

13053284774

From: Yanet Avila

4/3/23, 1:22 PM

Division of Corporations

L23000151428

Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
2 LIVE CULTURE LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$155.00

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2023-04-03 17:31:00 GMT

13053284774

From: Yanet Avila

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2 LIVE CULTURE 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:

1250 E HALLANDALE BEACH BLVD
STE 1002
HALLANDALE BEACH, FL 33009

SAME

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:

CRAIG LEBLANC

Name

1250 E HALLANDALE BEACH BLVD STE 1002

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

HALLANDALE BEACH FL 33009

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..

Craig LeBlanc

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 Member

"MGR" = Manager

AMBR

CHRISTOPHER MILES

1250 E HALLANDALE BEACH BLVD STE 1002

HALLANDALE BEACH, FL 33009

AMBR

CAJAN NELMS

1250 E HALLANDALE BEACH BLVD STE 1002

HALLANDALE BEACH, FL 33009

AMBR

LISA REDA

1250 E HALLANDALE BEACH BLVD STE 1002

HALLANDALE BEACH, FL 33009

AMBR

LAVAUGH KELLEY

1250 E HALLANDALE BEACH BLVD STE 1002

HALLANDALE BEACH, FL 33009

(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:

Craig LeBlanc

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.

CHRISTOPHER MILES

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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:AMBRCRAIG LEBLANC1250 E HALLANDALE BEACH BLVD STE 1002HALLANDALE BEACH, FL 33009

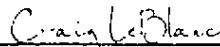
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ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

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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.517.155, F.S.

CRAIG LEBLANC

Typed or printed name of 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)