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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : MENDEZ ACCOUNTAX SERVICES, CORP

Account Number : I20060000145 : (305)769-4936 Phone Fax Number : (305)769-1844

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

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## FLORIDA LIMITED LIABILITY CO. LW INVESTMENT GROUP, LLC.

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From: Lify Mendez Fax: 13057694936 To: Fax: (850) 617-6381 Page: 2 of 3 04/07/2023 9:52 AM

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I- Name:

The name of the Limited Liability Company is:

### LW INVESTMENT GROUP, LLC

#### ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 4660 VOLUNTEER RD SOUTHWEST RANCHES, FL 33330

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

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

OSMANY MARTINEZ 4660 VOLUNTEER RD SOUTHWEST RANCHES, FL 33330

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at 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.

Registered Agent's Signature

Fax: (850) 617-6381 Page: 3 of 3 04/07/2023 9:52 AM From: Lify Mendez Fax: 13057694936 To:

ARTICLE IV:

AMBR

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

Name and Address: Title: OSMANY MARTINEZ **AMBR** 4660 VOLUNTEER RD SOUTHWEST RANCHES, FL 33330 NORAIMA MARTINEZ AMBR 4660 VOLUNTEER RD SOUTHWEST RANCHES, FL 33330 ERICK MARTINEZ AMBR 4660 VOLUNTEER RD

SOUTHWEST RANCHES, FL 33330

EMILY MARTINEZ 4660 VOLUNTEER RD

SOUTHWEST RANCHES, FL 33330

\_\_\_\_\_\_ Signature of member br an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

OSMANY MARTINEZ

Typed or printed name of signee.