Division of Corporations

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Fax Number : (850)617-6381

From:

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05/12/2023

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## FLORIDA LIMITED LIABILITY CO.

## Sakso, LLC

Certificate of Status	0		
Certified Copy	1		
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Estimated Charge	\$155.00		

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## ARTICLES OF ORIGINATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 NAME

The name of the Limited Liability Company is:

Sakso, LLC

ARTICLE II PRINCIPAL AND MAILING OFFICE ADDRESS

The principal place of business/mailing address is:

3633 Century Blvd., Unit #1 Lakeland, FL 33811

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

The name and Florida Street address of the initial registered agent is:

Brian Thompson

3633 Century Blvd., Unit #1

Lakeland, FL 33811

Having been named as registered agent and is 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.

Signature/Registere Agent

5/10/2023

ARTICLE IV Manager(s)

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

Brian Thompson - Manager 3633 Century Blvd., Unit #1 Lakeiand, FL 33811

ARTICLE V EFFECTIVE DATE

The effective date of this filing:

Immediately Upon Filing

Signature of a member or 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.)

Signature Incorporator/MGR.

RIAN A THOMPSON

Printed name of Signee

SECRETARY OF STATE