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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. **RKSNEAKERHAUL LLC**

Certificate of Status	1
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Company is:	
ARTICLE II - Address:	
- Mineakenchard	
ARTICLE II - Address:	
The mailing add	
Company is:	
by a serious of the principal office of the time	
The mailing address and street address of the principal office of the Limited Liability 2342 NW 14th St Miami FL, 33/25	
12 NV 14th St M.	
10/1ami F/ 22/25	
33/25	
ARTICIES	
ARTICLE III - Registered Agent, Registered Office: Company cannot serve as for idea street address of the	
The name and the Florida street address of the registered agent are: (The Limited Liability with an active Florida registration.)	
with an active Florida registration.) The Limited Liability	
(The Limited Liability	
Lonewto 2 1	
13Gyberence 2342	
33125 NW 14th St, Miami FL	
Roberto Barberena 2342 NW 14th St, Miami FL	۷
ARTICLE IV	
The non-	
The name and title of each person authorized to manage and control the Limited	
Liability Company: (MGR or AMBR)	
Roberto Barberena Katte partille	
(AMBR) (AMBR)	
(AMBR)	
(AMBR)	
N	
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	<u></u>

Required Signatures:

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 Depa tment of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

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 herely 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

Registered Agent's Signature (REQUIRED)