

**L23000236623**

Florida Department of State  
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To:

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

From:

Account Name : JFS CONSULTING SERVICES LLC  
Account Number : I20220000092  
Phone : (786)440-5553  
Fax Number : (786)279-5272

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 MAY 14 PM 3:28

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CORPORATIONS  
COMMERCIAL  
SERVICES

**FLORIDA LIMITED LIABILITY CO.**

**QuestSlingers LLC**

Certificate of Status	0
Certified Copy	0
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**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**Article I**

The name of the Limited Liability Company is:

QuestSlings LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:

2627 NE 203rd ST  
Suite 218  
AVENTURA FL. UN 33180

The mailing address of the Limited Liability Company is:

2627 NE 203rd ST  
Suite 218  
AVENTURA FL. UN 33180

**Article III**

Other provisions, if any:

ANY AND ALL LAWFUL BUSINESS

**Article IV**

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

Patrick Schneider  
1000 Parkview DR  
Apt 304  
Hallandale Beach FL, 33009

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.

Registered Agent Signature: Patrick Schneider

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## Article V

The name and address of person(s) authorized to manage LLC:

Title: MGRM  
Patrick Schneider  
1000 Parkview DR  
Apt 304  
Hallandale Beach FL, 33009

Title: MGRM  
Brian Mezzina  
1000 Parkview DR  
Apt 304  
Hallandale Beach FL, 33009

Title: MGRM  
Shimshon Schneider Jeselsohn  
279 Forrest St  
Apt 2  
Jersey City NJ, 07304

## Article VI

The effective date for this Limited Liability Company shall be:

05/09/2023

Signature of member or an authorized representative

Electronic Signature: Patrick Schneider

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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TALLAHASSEE, FL

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