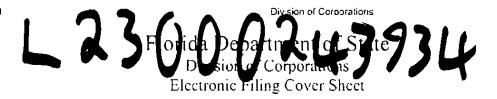
Page: 1 of 3

2023-05-16 15 23:28 CST

12122023573

From: David Thomas

5/16/23, 5 17 PM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 : (954)208-0845 Fax Number : (614)573-3996

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

Email Address: sebastian@langschwander.com

FLORIDA LIMITED LIABILITY CO. L&S Design Studio LLC

Certificate of Status	0
Certified Copy	1
Page Count	0.3
Estimated Charge	\$155.00

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Help

To: FL SOS 81 Page: 2 of 3 2023-05-16 15:23:28 CST 12122023573 From: David Thomas

DocuSign Envelope ID: 02FAE308-BAF5-4381-909D-DA44EC06DA2E

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

L&S Design Studio 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:
7400 NE 4th CT, Suite 102	7400 NE 4th CT, Suite 102
Miami, FL 33138	Miami, FL 33138

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:

LANG & SCHWAN	DER LLC Nime	
7400 NE 4th CT. Su	ite 102	
Florida street addres	is (P.O. Box <u>NOT</u> acc	eptable)
Miami	Florida	33138
Ċįv	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. Thereby accept the appointment as registered agent and agree to act in his 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 Opper 605, ITS

Registered Agent's Signature (REQUITED)
Name Sebastian Lang
Title: Manager of Registered Agent
(CONTINUED)

23 KAR 1 J. PM 3: 43

To: FL SOS 81 Page: 3 of 3 2023-05-16 15:23:28 CST 12122023573 From: David Thomas

DobuSign Envelope ID: 02FAE30B-BAF5-4381-909D-DA44EC06DA2E

LANC & SCHWANDER LLC 7400 NE 4th CT, Suite 102 Miami, FL 33138 EV: Effective date, if other than the date of filing: (OPTIONAL) retive date is listed, the date must be specific and cannot be more than five business days prior to or 90 de filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records. EVI: Other provisions, if any. Signature of a member substitution of the document is the constitutes at third degree felony as provided for in s.817.155, F.S. Sebassian Lang, as an authorized representative of the member. Typed or printed name of signer.	LANC & SCHWANDER LLC T400 NE 4th CT. Suite 102 Miami, FL 33138	Signature of a member of an authorized representative of a member. This document is recutted in the document is recutted in accordance with section 605.0203 (1) (b), Florida Statutes.	LANG & SCHWANDER LLC 7400 NE 4th CT. Suite 102 Miami, FL 33138 EV: Effective date, if other than the date of filing: (OPTIONAL) ctive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days ffiling.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I ment's effective date on the Department of State's records. EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.	Use attachment if necessary) W: Effective date, if other than the date of filing:	Use attachment if necessary) V: Effective date, if other than the date of filing: (OPTIONAL) (Inling.) (In	Use attachment if necessary) EV: Effective date, if other than the date of filing:	(Use attachment if necessary) EV: Effective date, if other than the date of filing:
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