Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H23000206395 3)))



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To:

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.

Seanuggets LLC

Certificate of Status	1
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H23000206395

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Seanuggets LLC

(Must end with 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:

5216 NE 5th Avenue

5216 NE 5th Avenue

Ft Lauderdale, FL 33334

Ft Lauderdale, FL 33334

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:

Brendon Simmer

Name

5216 NE 5th Avenue

Florida street address (P.O. Box NOT acceptable)

Ft Lauderdale

_L 33334

City

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. 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..

Breudou Simmer

Registered Agent's Signature (REQUIRED)

Brendon Simmer

(CONTINUED)

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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Brendon Simmer
	5216 NE 5th Avenue Ft Lauderdale, FL 33334
AMBR	Erika Franco
	5216 NE 5th Avenue Ft Lauderdale, FL 33334
	
(Use attachment if necessary)	
	ate of filing: (OPTIONAL)
EV: Effective date, if other than the directive date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
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E V: Effective date, if other than the dective date is listed, the date must be of filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation I am aware that any false	specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be of filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation I am aware that any false	Breudou Simuler member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true.

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