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From: RUBEM SOUZA

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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : MEDEIROS SOUZA CORP  
Account Number : 120190000068  
Phone : (407)325-8484  
Fax Number : (407)604-6519

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

Email Address: Contact@medeirosouza.com

FLORIDA LIMITED LIABILITY CO.

~~BOTELHO INVESTMENTS LLC~~ (LAB2FIT LLC)

Certificate of Status	1
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The registered office of the Company shall be located at 1711 Amazing Way, Ste 213, Ocoee, FL 34761, or at such location as may be determined by the Company's manager, and the Company's registered agent shall be MEDEIROS SOUZA CORP (P19000013780).

## ARTICLE 6 MANAGEMENT

Subject to the provisions of the Florida Revised Professional Limited Liability Company Act, the following provisions are adopted for the management of the business and for the conduct of the affairs of the Company:

6.1. The management of the Company is vested in the Manager, as defined in the Company's Operating Agreement. All determinations and decisions required or permitted to be made by the Manager shall be made by a board of managers consisting of each and all of the Managers (the "Board of Managers").

6.2. Initial Authorized Members. The name of the Corporate' Authorized Members are JOÃO VICENTE GAIDO JUNIOR, RAFAEL ISAAC PANIAGO and SILVANO RADKE whose mailing address is 2695 Plume Rd, Clermont , Florida 34711.

## ARTICLE 7 LIMITATION OF LIABILITY OF MANAGERS AND MANAGING MEMBERS

The liability of the managers and managing member of the Company for monetary damages shall be eliminated to the fullest extent permissible under Section 605.04093 of the Florida Revised Limited Liability Company Act.

## ARTICLE 8 INDEMNIFICATION OF COMPANY'S AGENTS.

Subject to the applicable limits set forth in Section 605.04093(2) of the Florida Revised Limited Liability Company Act, the Company is authorized to provide identification of this members, managers, managing members, officers, employees, and agents through operating agreement provisions.

IN WITNESS WHEREOF, the undersigned have hereunto executed these Articles of Organization on this Friday, July 21, 2023.



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Rubem Souza, LL.M.  
as Authorized Representative of the Manager

## **LAB2FIT LLC**

### **ACCEPTANCE OF THE REGISTERED AGENT**

I hereby am familiar with and accept the duties and responsibilities as registered agent for  
**LAB2FIT LLC.**



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Rubem Souza, LL.M.  
Date: 7/21/23