Division of Corporations **Electronic Filing Cover Sheet**

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.

(((H23000260773 3)))



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 : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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

Email Address:__

FLORIDA LIMITED LIABILITY CO. **ONFOCUS, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



PAGE 02/03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

			TO TAKE THE COMPANY			
ARTICLE I - Name:						
The name of the Limited Lia	hility Company is:					
	outly company is.					
5						
ONFOCUS, LLC						
(Must a	ontain the words "Limite	d Liability Comp	any, "L.L.C.," or "LLC.")			
		,	- The best of been y			
ARTICLE II - Address:						
The mailing address and street	address of the principal	office of the Lin	ited Liability Company is:			
			• •			
Principal Office Address:			Mailing Address:			
8430 SW 40TH ST	<u> ree</u> t		3430 SW 40TH STREET			
			200 317 401H 31REE1	 _		
MIAMI, FL 33155			MAMI, FL 33155			
A D'THAIL IN COLUMN		_			-	
ARTICLE III - Registered A	Agent, Registered Office	, & Registered /	gent's Signature;			
Commence of the parties of the parti	ory cannor serve as its no	n Recicional Sau	i gent's Signature; nt. You must designate an individi	cal or		
another business entity with a	ii active morida registrati	ion.)		77	2	
The name and the Florida street address of the registered agent are:				02:		
TO THE STATE OF TH	er address of the registere	id agent are:		ントラ	<u></u>	
	GLENDY M. OLIVE	RO ROMERO		≭ Γ	2023 JUL 2	
		Name		HASSE	2	
					9	:
	8430 SW 40TH STR					
	Florida street addre	ss (P.O. Box <u>NO</u>	L'acceptable)	'	\equiv	
			- ,	HE DOM	AH 10: 16	-
	MIAMI	<u>FL</u> _	33155		6	
	City	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, 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 CO5, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE I	V.
-----------	----

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member "MGR" = Manager MGR	Name and Address: EDGAR J. MARTINEZ SANTOS 8430 SW 40TH STREET MIAMI, FL 33155
MGR	GLENDY M. OLIVERO ROMERO 8430 SW 40TH STREET MIAMI, FL 33155
(Use attachment if necessary)	
The date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of S ARTICLE VI: Other provisions, if any	ic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed as tate's records.
ANY AND ALL LAWFUL BUSINESSÉS	
I am aware that any false info	or or an authorized representative of a member. a accordance with section 605.0203 (1) (b), Florida Statutes, irmation submitted in a document to the Department of State may as provided for in s.817.155, F.S.

GLENDY OLIVERO - ROMERO

Typed or printed name of signee