## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. SATORI GROUP LLC

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APTICIFY	COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	,
	202
Satori Group LLC	्रिक्त के किया है। इसके किया के क
ARTICLE II - Add	22 22
The mailing address and street address of the principal Company is:	Top B
company is:	office of the Limited Liability 🤝 🛴
66/9 South Dixie fly	#324
Minn. FL 33143	
ARTICLE III - Registered Agent, Registered Office:	
The name and the Florida street address of the registered of the registered company cannot serve as its own Registered Agent. You must designate on individual an active Florida registration.	ed agent are: The United States
Company cannot serve as its own Registered Agent. You must designate an individual with an active Florida registration.)	fual or another business entity
Alexander Gort	•
Gold South Dixe tu	
Man; FC 33143	
ARTICLE IV	
The name and title of each person authorized to manage Liability Company: (MGR or AMBR)	and control the Limited
Zachan Alan Rolz (Aux	00
Alexander Gort LAMP	20)
	1

EIN: 93-3552957

## Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.

Typed or printed name of signee

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 here by 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..

Registered Agent's Signature (REQUIRED)