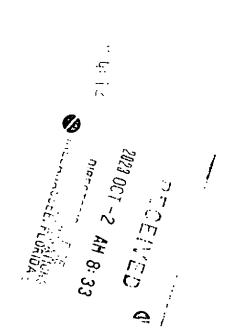
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	·
'	(Requestor's Name)
-	(Address)
	(Address)
	•
•	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
.	(Business Entity Name)
	(Document Number)
	(Cocament Namber)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
opeoid, madedona to	. milg 0111001.









Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FŁ 32303

corphelp@dos.myflorida.com 850-245-6051 FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST_DATE 9/29/2023

PRIORITY Regular Approval

OUR REF_#_(Order_ID#) 1182651

ORDER ENTITY
CABLE KINGS LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

CABLE KINGS LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, September 29, 2023 Page 1 of 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	· Company is:			
Cable Kings LLC				
	in the words "Limited	Liability Compan	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Limite	ed Liability Company is:	
<u>Principa</u>	l Office Address:		Mailing Address:	
2031 Harrison Street		20	2031 Harrison Street	
Suite 3			Suite 3	
Hollywood, FL 33020)	He	Hollywood, FL 33020	
another business entity with an ac The name and the Florida street a	•			
	Hya Prusenko			
		Name		
	2031 Harrison Street	t, Suite 3		
	Florida street addres	ss (P.O. Box <u>NOT</u>	acceptable)	
	Hollywood	FL.	33020	
	City	State	Zip	
dace designated in this certificate, i arther agree to comply with the pro	hereby accept the apprisions of all statutes rigations of my position /s	oiniment as registi elating to the prop as registered ager / Hya Prusenko	the above stated limited liability company at the ered agent and agree to act in this capacity. I her and complete performance of my duties, and at as provided for in Chapter 605, F.S hature (REQUIRED)	

2028

ARTICLE IV-

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

<u>Title:</u> "AMBR" =	Name and Address; Authorized Member
"MGR" = N	
AMBR	llya Prusenko
	1lya Prusenko 2031 Harrison Street, Suite 3 1lollywood, FL 33020
	11011yw00u, P4, 25020
	
	
(Use attachr	nent if necessary)
e date of filing.) <u>iote:</u> If the date ins	elisted, the date must be specific and cannot be more than five business days prior to or 90 days after erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ive date on the Department of State's records.
REOUIRE	SIGNATURE:
	/s/ liya Prusenko
	Signature of a member or an authorized representative of a member.
	This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.
	Hya Prusenko
	Typed or printed name of signee
	Filing Fees:
C135 00 E	ling For for Astislay of Organization and Decignation of Decistand Agent

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

\$707
