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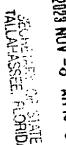
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PICK-UP WAIT MAIL
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COVER LETTER

	ew Filing Sec ivision of Co						
SUBJECT		ida 2023, LLC					
SUBJECT	•	Name	e of Limit	ed Liabilit	y Company		
The enclos	ed Anicles of	Organization and f	ee(s) are s	ubmitted f	or filing.		
Please retu	rn all correspo	ondence concerning	this matte	er to the fo	llowing:		
	Jed R. Fried	man, Esq.					
				Name of P	erson	·	
	Jed R. Fried	man, P.A.					
				Firm/Con	pany		
	25 SE 2nd A	venue Suite 716					
				Addres	is		
	Miami, Flori	ida 33131					
	F: 1 1 (City	/State and	Zip Code		
		irm@gmail.com E-mail address: (to	ho used fo	ar futuro an	nual report notificati	<u> </u>	
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	Jed Friedmar	1	305 at ()	375-0808		
	Nan	ie of Person	_ —	a Code	Daytime Telephone	e Number	
Enclosed is	s a check for t	he following amour	nt:				
		_	Fee & atus	Certifie	00 Filing Fee & 1 Copy copy is enclosed)	□S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		ig Address			treet Address		
		iling Section		New Filing Section Division The Centre of Tallahassee			
		on of Corporations lox 6327			ne Centre of Taliana 415 N. Monroe Stree		
		assee, FL 32314			allahassee, FL 3230.		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
La Bella Vida 2023, LLC	
(Must contain the words "Limited Liabil	lity 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:
3131 NE 188 Street	3131 NE 188 Street
No. 21010	No. 21010
Miami, FL 33180	Miami, FL 33180
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Regi another business entity with an active Florida registration.) The name and the Florida street address of the registered ager	stered Agent. You must designate an individual or

Name

Name

3131 NE 188 Street, No. 21010

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

 Miami
 FL
 33180

 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Anabell Assouline 3131 NE 188 Street, No. 21010 Miami, FL 33180	
		
(Use attachment if necessary)		
of filing.)	ecific and cannot be more than five business days prior neet the applicable statutory filing requirements, this date of State's records.	
of filing.) the date inserted in this block does not n	neet the applicable statutory filing requirements, this date	
of filing.) the date inserted in this block does not not ment's effective date on the Department of	neet the applicable statutory filing requirements, this date	e will not
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