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

(((H230004170513))) H230004170513ABCX 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 : I2000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 \*\*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. A.P. INTERIOR REMODELING LLC

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

Electronic Filing Menu Corporate Filing Menu Help

 $\alpha \alpha \alpha$ 

## ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY EFFECTIVE: 1-1-24

ARTICLE	7	_	Na
TDI	•	_	rraine;

The name of the Limited Liability Company is:

1 — J 151		
ARTICLE II - Address: The mailing address and cross 1)		
ARTICLE II - Address:	Æ,	110
The mailing address:		Lole (
The mailing address and street address of the principal office of the Limited I		
or the principal office of the Limited		
er and military	⊣abilit	У
MIGNI TO TERR		
MIDNAL		
-11/11/1/		
MIAMI 9 33/65		
ARTICLE III - Registered Agent, Registered Office:		
The name and the Florida street address of the registered agent are: (The Luniter Luniter With an active Florida registered Agent. You must designate an individual or another inspirer and with an active Florida registration.)		·- <del>-</del>
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity  A.		
with an active florida registered Agent. You must designed an inchest after the Limites' L	iohiltm	
(885 vation.)		
TOSC ANTONIO		
9000 ANTONIO PINZ		
9275 011		
MIAMI		<u>.</u>
33165		
ARTICLE IV		
The name and title of any		
Liability date of each person authorized to manage and		
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	1	
Tan- n	•	
JOSE ANTONIO PINO	<del></del>	<b>D</b> 2
THE PINCE	د زر ۱۳۰۰	55
	_	ero Ero
- $(AM2n)$		17
		(
		<u> </u>
	⋽.	1/2
	<del></del>	
		.0

## 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 (f 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 herely 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)