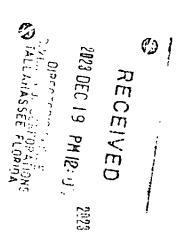
## L23000555518

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Constitution of Sites Office				
Special Instructions to Filing Officer:				





500420343845







115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	12/19/2023				
Name:	Juliana				
	#:2211449	<u></u>			
Entity Nam	e:PERFE	CTION PURVEYORS FL LLC			
		horization to Transact Business			
☐ Ame	endment				
Change of Agent					
☐ Rein	nstatement				
Conversion					
☐ Mer	ger				
☐ Dissolution/Withdrawal					
Fictitious Name					
<b>✓</b> Othe	er / Plea	ase provide certified copy upon filing /			
Authorized	Amount:\$15	55.00			
Signature:	Juliana Presti	a			

F: 800.944.6607

F: •852.2682.9790



115 N CALHOUN ST., STE, 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	12/19/202	3				
Name:_	Jul	iana				
Referer	nce #: <b>2</b>	211449				
Entity N	ame:	PERFECTION P	URVEYORS FL LLC			
V A	Articles of Incorpor	ation/Authorization t	o Transact Business			
Amendment						
☐ Change of Agent						
□ F	Reinstatement					
	Conversion					
□ N	☐ Merger					
☐ Dissolution/Withdrawal						
F	ictitious Name					
<b>V</b>	Other	Please provide	certified copy upon filing /			
Authoriz	zed Amount:	\$155.00	<del></del>			
Signatu	re: <u>uliana</u>	Præstia				

## ARTICLES OF ORGANIZATION OF PERFECTION PURVEYORS FL LLC

ARTICLE I: - Name

The name of the Limited Liability Company is:

## PERFECTION PURVEYORS FLALC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

2424 S.W. 22<sup>nd</sup> Street Miami, Florida 33145

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

Cogency Global Inc. 115 N. Calhoun Street Suite 4 Tallahassee, Florida 32301

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.

By:

Hame: Ken Hausel

Title: Asss. Seenesmel

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on December 15, 2023.

Yvonne Rodriguez, Authorized Signer

(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 Section 817.155. Florida Statutes.)

Yvonne Rodriguez
Typed or printed name of signee