

## Florida Department of State

Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : STOLZENBERG, GELLES & FLYNN, LLP  
Account Number : 120100000018  
Phone : (305)961-1450  
Fax Number : (305)423-3979

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: hbaker@jmpartners.com

**FLORIDA LIMITED LIABILITY CO.  
H & L SMD, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2023 DEC 20 PM 4:54

T.J.H.

12/21/23

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**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I  
NAME**

The name of the Limited Liability Company is:

**H & L SMD, LLC**

**ARTICLE II  
ADDRESS**

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

Mailing Address:

2678 Cypress Lane  
Weston, FL 33330

Principal Office Address:

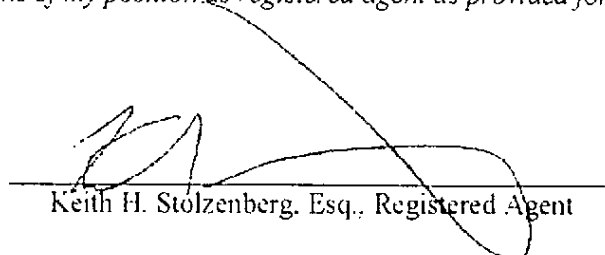
2678 Cypress Lane  
Weston, FL 33332

**ARTICLE III  
REGISTERED AGENT AND REGISTERED OFFICE**

The name and street address of the registered agent is:

**STOLZENBERG GELLES FLYNN & ARANGO, LLP**  
1533 Sunset Drive, Suite 150  
Coral Gables, Florida 33143

*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.*



Keith H. Stolzenberg, Esq., Registered Agent

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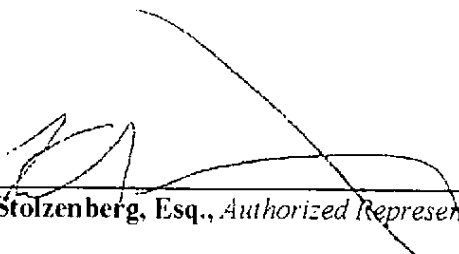
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**ARTICLE IV**  
**MANAGEMENT**

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

**AMBR:**           **HOWARD BAKER**  
*Authorized Member*   2678 Cypress Lane  
                                Weston, FL 33332

**AMBR:**           **LARA BAKER**  
*Authorized Member*   2678 Cypress Lane  
                                Weston, FL 33332

  
\_\_\_\_\_  
**Keith H. Stolzenberg, Esq.,** *Authorized Representative*

(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.)

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