# L24000032792

(Red	questor's Name	)			
(Add	dress)	<del></del>			
(Add	dress)				
( )					
(City	//State/Zip/Phor	ne #)			
PICK-UP	WAIT	MAIL			
(Bus	siness Entity Na	me)			
·	,	,			
	L NJ L				
(D00	cument Number	,			
Certified Copies Certificates of Status					
Special Instructions to F					
Special instructions to F	·lling Officer.				

Office Use Only



000418436570

01/18/24--01007--008 \*\*125.00

SECTION OF TAIL

## CORPORATE ACCESS, \_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

#### **WALK IN**

PICK UP: MISTY 1/18

	CERTIFIED COST			
	CERTIFIED COPY	-	 <u>-</u> .	· · · · · ·
XX	РНОТОСОРУ	<del></del>	 	<u> </u>
	CUS	<del> </del>	 	
XX	FILING	LLC	 	
_	HUN ANGEKS LLC			
	(CORPORATE NAME AND DOCU	JMENT #)	 ,	
-	(CORPORATE NAME AND DOCU	JMENT #)	 	
_	(CORPORATE NAME AND DOCU	IMENT #)	 	
-	(CORPORATE NAME AND DOCU	IMENT #)	 <del></del>	<u> </u>
-	(CORPORATE NAME AND DOCU	MENT #)	 <del></del>	<u></u>
_	(CORPORATE NAME AND DOCU	A FEN TO U	 <del></del>	

### ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I.

The name of the Limited Liability Company is:

#### **HUN ANGELS LLC**

#### **ARTICLE II.**

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

2713 NE 184™ Terrace

AVENTURA FL 33160

The mailing address of the Limited Liability Company is:

2713 NE 184th Terrace

AVENTURA FL 33160

#### ARTICLE III.

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

#### ARTICLE IV.

The name and the Florida street address of the registered agent are:

GRETA, GUBACSI

2713 NE 184TH Terrace

AVENTURA FL 33160

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

Date:

01/16/2024

#### ARTICLE V.

The name and address of each Manager or Managing Member is as follows:

Name and Address:

Title: MGRM

**GUBACSI, GRETA** 

2713 NE 184TH Terrace

**AVENTURA FL 33160** 

**GUBACSINE ZENTAI, REGINA** 

Get 2ent ofice

Title: MGR

2713 NE 184<sup>™</sup> Terrace

**AVENTURA FL 33160** 

GUBACSI, ZOE

Title: MGR

2713 NE 184™ Terrace

AVENTURA FL 33160

Com Zu

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.

Signature of a member or an authorized representative of a member.

Greta Gubacsi 01/1

Typed or printed name of signee Date

21124