## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Number : I20000000019

Phone : (305)552-5973

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## FLORIDA LIMITED LIABILITY CO. 1600 SW 11TH ST ONE LLC.

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: (Must end with the words "Limited Is "L.L.C.," or "LLC.")	Lic bilini Comn	201)
1600 SW 11TH ST ONE		
ARTICLE II - Address: The mailing address and street address of the principal office of the Lim Company is:  // AU FL 33135  ARTICLE III - Registered Agent, Registered Office: The name and title of each person authorized to manage and control the	· Limited Liab he · business e	
Dismara Gamboa LeyTe	<u> </u>	202 <b>4</b> JA
MBR.	<b></b>	# 22 Pri
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## 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 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.

Oswava Sawboa LEyTE

Typed or printed name of signce

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)