

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L24000038375  
FILED 8:00 AM  
January 19, 2024  
Sec. Of State  
dsultana**

**Article I**

The name of the Limited Liability Company is:

OMEGA 8 ENTERPRISES, LLC

**Article II**

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

13579 NW 56TH AVE  
GAINESVILLE, FL. US 32653

The mailing address of the Limited Liability Company is:

13579 NW 56TH AVE  
GAINESVILLE, FL. US 32653

**Article III**

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

ADRIENNE KASHETA  
13579 NW 56TH AVE  
NW 56TH AVE  
GAINESVILLE, FL. 32653

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.

Registered Agent Signature: ADRIENNE KASHETA

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: AR  
ADRIENNE KASHETA  
13579 NW 56TH AVE  
GAINESVILLE, FL. 32653 US

Title: AR  
LENA LYCKE  
141 EGRET DR  
JUPITER, FL. 33458 US

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### **Article V**

The effective date for this Limited Liability Company shall be:

01/19/2024

Signature of member or an authorized representative

Electronic Signature: ADRIENNE KASHETA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.