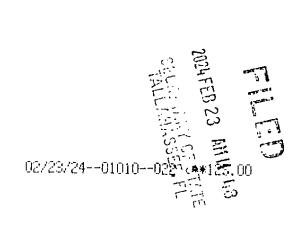
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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COVER LETTER

TO: New Filing Se Division of Co		
F&G Flor SUBJECT:	orida, LLC	
30BJEC1.	Name of Limited Liability Company	
The enclosed Articles o	of Organization and fee(s) are submitted for filing.	
Please return all corresp	spondence concerning this matter to the following:	
Andres Feli	elipo Reyes	
	Name of Person	
_		
	Firm/Ccmpany	
2820 SW 75	75th Way, Apt. 2512	
	Address	
Davie, FL	33314	
·	City/State and Zip Code	
a.f.reyes@ho		
	E-mail address: (to be used for future annual report notification)	
For further information ec	concerning this matter, please call:	
Andres Felip	ipe Reyes 941 334-9987	S 28
Nan	ame of Person Area Code Daytime Telephone Number	2024FEB (
Enclosed is a check for t	r the following amount:	23
■\$125.00 Filing Fee	☐\$130.00 Filing Fee & ☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee &	tatus &

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITIED LIABILITY COMPANY

F&G Florida, LLC				
	ntain the words "Limited	Liability Company.	"L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street	address of the principal	office of the Limited	Liability Company is:	
<u>Princ</u>	ipal Office Address:		Mailing Address:	
2820 SW 75th Way		างา	0 SW 75th Way	
2020 3 W / Jul Way	<i>'</i>	404		
Apt. 2512	,		. 2512	
Apt. 2512 Davie, FL 33314 ARTICLE III - Registered A (The Limited Liability Compare)	gent, Registered Office,	Apt Dav & Registered Age 1 Registered Agent.	. 2512 ie. FL 33314	
Apt. 2512 Davie. FL 33314 ARTICLE III - Registered A The Limited Liability Comparanother business entity with an	gent, Registered Office, by cannot serve as its own active Florida registration address of the registere	Apt Day & Registered Age a Registered Agent. on.) d agent are:	2512 ie. FL 33314 nt's Signature:	
Apt. 2512 Davie, FL 33314 ARTICLE III - Registered A The Limited Liability Comparanother business entity with an	gent, Registered Office, ny cannot serve as its own n active Florida registration	Apt Dav & Registered Age a Registered Agent. on.) d agent are:	2512 ie. FL 33314 nt's Signature:	
Apt. 2512 Davie, FL 33314 ARTICLE III - Registered A The Limited Liability Comparanother business entity with an	gent, Registered Office, by cannot serve as its own active Florida registration address of the registere	Apt Day & Registered Age a Registered Agent. on.) d agent are:	2512 ie. FL 33314 nt's Signature:	
Apt. 2512 Davie, FL 33314 ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, by cannot serve as its own active Florida registration address of the registere	Apt Day & Registered Age Registered Agent. on.) d agent are: Name	2512 ie. FL 33314 nt's Signature:	
Apt. 2512 Davie. FL 33314 ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, by cannot serve as its own active Florida registration address of the registere Andres Felipe Reves	Apt. 2512	ie. FL 33314 nt's Signature: You must designate an individual or	
Apt. 2512 Davie, FL 33314 ARTICLE III - Registered A	gent, Registered Office, by cannot serve as its own active Florida registration address of the registere Andres Felipe Reves	Apt. 2512	ie. FL 33314 nt's Signature: You must designate an individual or	

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 egent as provided for in Chapter 605, F.S.,

(CONTINUED)

ARTICLE IV-

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

Title:		Name and Address:	
	Authorized Member		
MGR = M	lanager		
<u>M</u> GR		Andres Felipe Reves	
		2820 SW 7th Way. Apt. 2512	
		Davie, FL 33314	
(Use attachn	nent if necessary)		
If the date inse ocument's effect	rted in this block does no ive date on the Departme	of meet the applicable statutory filing requirements, this date will not be list not of State's records.	ted as
ICLE VI: Other p	provisions, if any.		
REQUIRED	SIGNATURE:		
	Andres Felig	member or an authorized representative of a member.	
	Signature of a	member or an authorized representative of a member.	
	inis document is exe	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.	E U
	I am aware that any fa	lse information submitted in a document to the Department of State	
	constitutes a third deg	ree felony as provided for in s.817.155. F.S.	1
	Andres Felipe	Reves S	ستا
	randies i embe	Typed or printed name of signce Filing Fees: Organization and Designation of Registered Agent	U -
		Filing Fees:	
\$125.00 Fit	ing Fee for Articles of C	Organization and Designation of Registered Agent	
\$ 30.00 Ca	rtified Copy (Optional)	Secure and excellention of technical When	
2 30.00 CC	THE COPY (OPTIONAL)		
	rtificate of Status (Onti	anal)	